

BWL club insurance application form

Information you give us

You must take care in answering all of the following questions which are relevant to insurers in providing this insurance and setting the terms and premium. Please contact Bluefin Sport if you do not understand the question or the nature of the information required.

You must tell us as soon as practicably possible about any changes to the information you have provided to us which happens before or during any period of insurance. We will tell you if such change affects your insurance and if so, whether the change will result in revised terms and/or premium being applied to your policy. If you do not inform us about a change it may affect any claim you make or could result in your insurance being invalid.

Presentation

This proposal form must be completed by an authorised individual; your partner, principal, director or member. All questions must be answered. If there is insufficient space to provide answers, additional information should be provided on your letter-headed paper.

Where details of your web address have been provided any information contained within or linked to it will be treated as not having been provided unless such information is specifically supplied to us in written form.

Guidance

If in doubt as to the meaning of any question contained within this proposal form or the issues raised in the sections entitled 'Information You Give Us or Presentation', advice should be sought from Bluefin Sport.

1. Club details

Premium

(Please complete sections 1 to 6, ensuring you sign the declaration on the back)

£895

Club Name			
Risk Address:			
Postcode:	Phone:		
Email:			
Please only complete i	f correspondence details wil	I differ from the club address above	ve.
Contact Address:			
Postcode:	Phone:		
Email:			
2. Policy level of	f cover required		
Please select level of co			
	SILVER	GOLD	
(Please tick)			

Marsh 2

£1430

3. Required information

Please indicate your current wageroll	£
	If exceeds £35,000, premium may alter.
Please provide details of your turnover	£
	If exceeds £100,000, premium may alter.
How many members do you currently have?	
Discourse ideas on EDM (if any lively)	
Please provide your ERN (if applicable)	

4. Inception date

Please confirm the date you wish the cover to start

Please note that cover cannot commence until payment has been received and the application form accepted and cover confirmed to you in writing by Bluefin Sport.

5. Payment method

Please state the total premium due and payment method

I would like to pay by cheque for the full amount I would like to pay by instalments over 10 months

6. Your contact preferences

We would like to get in touch from time to time to tell you about products and services that we think will be of interest. This may include other insurance products that could help increase your insurance protection or useful news and risk management advice on topics to keep safe and avoid claims. Your details will only be used by us - we'll never share your information with other organisations for marketing purposes. Please tell us how you would like to hear from us:

Email	Post	Telephone	

(by ticking these boxes you confirm you're over 18).

You can change your contact preferences whenever you like by contacting us on 0345 872 5060 (Monday to Friday 9am to 5pm) or emailing sport@bluefinsport.co.uk. If you are interested in how we use your personal information and how you may exercise your rights in respect of that information, please refer to our privacy notice at https://www.marsh.com/uk/privacy-notice.html.

7. Declaration

For and on behalf of the applicant I represent that the above statements and facts are true and that no material facts have been suppressed or mis-stated. I understand that completion of this form does not bind coverage. The Applicant's acceptance of the company's quotation and the company's acceptance of the applicant's proposal is required before cover may be bound and the policy issued.

I further declare that on behalf of the Club / Association I:

- have either completed all the questions on this form personally or they have been completed by somebody else on my behalf and the answers have been checked for fullness and accuracy by me.
- am a duly authorised officer of the club / association applying for insurance for the purpose of completing this application.
- have read and understood the information concerning, the duty of disclosure, average provisions, utmost good faith, material fact, claims made, liability assumed under agreement and also the data protection information. Agree on behalf of the applicant to Sportscover obtaining from the applicant's previous insurer(s) any information it may need about prior claims or insurance history.
- agree to Sportscover making enquires from any third party to verify claims history and other information disclosed herein or statements made by the applicant or its representatives in making this application.
- agree to Sportscover disclosing to any insurance intermediary appointed by the applicant or to any former or future insurer of the applicants the claims history or any other information as may be determined.

	<u> </u>
Position	Signature
Name (printed)	
Date	

Duty of disclosure

Please remember that it is a condition of your insurance policy to keep your insurers informed, especially at renewal, of any material facts or changes that may affect your policy. Failure to do so may result in claims not being paid or cover being declared inoperative. In addition, where specific information is requested, it is important to inform your insurers as fully and as completely as possible in response to the questions asked. If you have any doubts or concerns please contact your broker. In any event, it is your responsibility to ensure that your broker provides all information to the insurers so that they may consider the proposed renewal with the benefit of the fullest possible relevant information.

Average provision

One of the insuring provisions of the Professional Indemnity Insurance Policy provides that where the amount required to dispose of a claim exceeds the Limit of Liability in the policy Underwriters shall be liable only for a part of the total costs and expenses which shall be the same proportion of the total expenses as the policy limit bears to the total amount required to dispose of the claim.

Utmost good faith

This insurance is a contract based on the utmost good faith requiring Underwriters and the proposer/insured(s) to act towards each other with the utmost good faith in respect of any matter relating to this insurance.

Material fact

A material fact is any fact that an insurer would take into account in deciding whether to take the risk, or at what premium, or on what conditions.

Liability assumed under agreement

Cover provided by this form of liability insurance does not cover liability which you have agreed to accept unless you would have been so liable in the absence of such agreement.

Data protection information uses

For the purposes of the Data Protection Act 1998, the Data Controller in relation to any personal data you supply is Sportscover Europe Ltd.

Insurance administration

Information you supply may be used for the purposes of insurance administration by the insurer, its associated companies and agents, by reinsurers and your intermediary. It may also be disclosed to regulatory bodies for the purposes of monitoring and/or enforcing the insurer's compliance with any regulatory rules/codes. Your information may also be used for offering renewal, research and statistical purposes and crime prevention. It may be transferred to any country, including countries outside the European Economic Area for any of these purposes and for systems administration. Information may also be shared with other insurers either directly or via those acting for the insurer (such as loss adjustors or investigators).

In the case of personal data, with limited exceptions, and on payment of the appropriate fee, you have the right to access and if necessary rectify information held about you.

Sensitive data

In order to assess the terms of the insurance contract or administer claims which arise, the insurer may need to collect data which the Data Protection Act defines as sensitive (such as medical history or criminal convictions). By proceeding with this application you will signify your consent to such information being processed by the insurer or its agents.

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8. The next step

BY POST: ONLINE:

Please send this form together with a cheque made payable to 'Marsh Ltd' and post to:

Bluefin Sport, Castlemead, Lower Castle Street,

Bristol BS1 3AG

Our payment options include the ability to pay the insurance premium over 10 monthly instalments. This is not an offer. Acceptance of your credit application by Close Brothers Premium Finance is subject to your financial circumstances and status.

Email the form to: sport@bluefinsport.co.uk

Upon receipt of your request we will arrange to forward the finance application details to you.

Please note that cover cannot commence until payment has been received and the application form accepted and cover confirmed to you in writing by Bluefin Sport.



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