SCHEDULE OF INSURANCE

This schedule of insurance should be read in conjunction with the certificate of insurance.

UNIQUE MARKET REFERENCE NUMBER	Not Applicable
CERTIFICATE NUMBER	POL-21052510201688/STAFFS/25
NAME OF CLUB OR TEAM	Staffordshire FA - WF Basic
INSURED SPORTS	Walking Football
NUMBER OF TEAMS	To be advised
NUMBER OF PLAYERS	To be advised
INSURED PERSONS	All playing members including officials recorded on the team register prior to participating in team events and matches.
OPERATIVE TIME	means the period of time within the period of insurance during which the insured person is participating as an amateur in official club or team events and matches organised by the insured club or team including official training or practice sessions and whilst travelling thereto and therefrom in an organised party under the jurisdiction of the insured club or team, within the Geographical Limits stated in the Schedule of Insurance.
GEOGRAPHICAL LIMIT	United Kingdom
PERIOD OF INSURANCE	From: 01/07/2025 To: 30/06/2026 (both days inclusive - Greenwich Mean Time)
TOTAL PREMIUM INCLUDING IPT	To be advised
INSURANCE PREMIUM TAX (IPT)	To be advised
GROSS PREMIUM*	To be advised
ADMINISTRATION FEE	To be advised

***including the premium for death by natural causes. No IPT is applicable.**

DEATH FROM NATURAL CAUSES SECTION

Sportsguard has arranged the insurance against **death by natural causes** provided under this certificate with Maiden Life Försäkrings AB, UK Branch.

PERSONAL ACCIDENT SECTION

Sportsguard has arranged the insurance against **bodily injury** caused by an **accident** provided under this certificate with American International Group UK Limited (AIG UK).

SCHEDULE OF BENEFITS

This schedule of benefits should be read in conjunction with the certificate of insurance.

Benefit		Sum Insured applicable to each **insured person**
DEATH BY NATURAL CAUSES SECTION		
1.	**death by natural causes**	GBP 10,000
PERSONAL ACCIDENT SECTION		
2.	death by **accident**	GBP 10,000
3.	**loss of sight** in one or both eyes	GBP 25,000
4.	**loss of limb**, one or more	GBP 25,000
5.	**loss of speech**	GBP 25,000
6.	**loss of hearing** in both ears	GBP 4,000
7.	**loss of hearing** in one ear	GBP 2,000
8.	**quadriplegia**	GBP 25,000
9.	**paraplegia**	GBP 9,000
10.	permanent partial disablement	Not Covered
11.	**permanent total disablement** other than benefts states above	GBP 25,000
12.	**temporary total disablement**	**insured persons** in gainful employment: 65% of the **insured person's weekly wage**, during the 12 months immediately prior to any claim, up to a maximum of Not Covered benefit period: Not Covered **excess period**: Not Covered
		insured persons not in gainful employment: 50% of the above Not Covered benefit period: Not Covered **excess period**: Not Covered

PERMANENT PARTIAL DISABLEMENT SCALE
The % of the sum insured under the permanent partial disablement benefit in respect of permanent partial disablement is as follows:

loss by amputation or permanent total loss of use of:

(a) foot below the level of the ankle (talofibular joint) 100% *
(b) thumb 40% *
(c) one forefinger or big toe 30% *
(d) any other finger 20% *
(e) any other toe 8% *

loss of use of:

(a) back or spine (excluding cervical) without cord involvement 80% *
(b) neck or cervical spine without cord involvement 60% *
(c) shoulder, elbow or wrist 50% *
(d) hip, knee or ankle 40% *

* of the sum insured under item 10 of the Schedule of Benefits.

PROVISIONS APPLICABLE TO THE PERMANENT PARTIALMENT SCALE
1. If compensation is payable in respect of the **insured person** under more than one form of permanent partial disablement as a result of one **accident**, the total amount payable shall not exceed in total more than the sum insured under the permanent partial disablement benefit.
2. If compensation is payable for loss of or loss of use of a whole member of the body, then compensation for parts of that member cannot also be claimed.

ADDITIONAL BENEFITS APPLICABLE TO PERSONAL ACCIDENT

The following additional benefits are applicable to the Personal Accident benefits of this policy where a sum insured is shown below. Such sums insured shall apply to each **insured person**.

Benefit		Sum Insured applicable to each **insured person**
1.	**fracture of a bone:**	
	in the arm at or above the wrist	GBP 150
	in the leg at or above the ankle	GBP 150
	in the hand (excluding fingers) or in the foot (excluding toes)	GBP 50
	in the collarbone	GBP 150
	in the cheekbone	GBP 150
	in the jaw	GBP 150
	in the fingers	GBP 50
	in the toes	GBP 50
	in the hip	GBP 150
	in the rib	GBP 50
	in the shoulder (scapula)	GBP 150
	in a growth plate (also known as Salter Harris Type 1)	GBP 150
	in the skull	GBP 150
	in the spine	GBP 150
2.	**dislocation**:	
	of the hip	GBP 150
	of the kneecap	GBP 150
	of the shoulder	GBP 150
	of the elbow	GBP 150
3.	Snapped/ruptured:	
	achilles tendon	GBP 250
	anterior cruciate ligament	GBP 250
	posterior cruciate ligament	GBP 250
	medial collateral ligament	GBP 250
4.	**loss of internal organ**	GBP 2,000
5.	Facial and bodily scarring	GBP 300
6.	Emergency dental expenses	up to GBP 100
7.	Hospital confinement	GBP 25 per night benefit period: 10 nights
8.	Concussion	GBP 2,000
9.	Rehabilitation retraining expenses	up to GBP 2,000
10.	Academic examination re-sit	up to GBP 2,000
11.	Disability assistance expenses	up to GBP 2,000
12.	Emergency medical expenses	up to GBP 500
13.	Student tutorial expenses	Not Covered benefit period: Not Covered **excess period**: Not Covered
14.	Coma benefit	GBP 25 per day benefit period: 365 days
15.	Medical certification expenses	Not Covered

16.	Funeral expenses	up to GBP 1,000
17.	Specialist consultant fees	Not Covered
18.	Pre-paid season or travel tickets	Not Covered
19.	Physiotherapy benefit (calculated on 50% of the receipted cost of each session)	up to GBP 40 per session benefit period: 6 sessions
20.	Additional travel costs	up to GBP 25 per week benefit period: 4 weeks
21.	Childcare expenses	Not Covered benefit period: Not Covered **excess period**: Not Covered
22.	Chauffeur expenses	Not Covered benefit period: Not Covered **excess period**: Not Covered
23.	Home assistance benefits	Not Covered benefit period: Not Covered **excess period**: Not Covered
24.	Broken or damaged sports glasses	up to GBP 50
25.	Damage to clothing by a medical practitioner	up to GBP 50
26.	Legal advice	Not Covered

Subject otherwise to the terms, definitions, conditions and exclusions listed within the Schedule of Insurance, Certificate of Insurance and any other attaching endorsements.

In witness, where of this schedule has been signed by Sportsguard on behalf of:

Death by Natural Causes section
Maiden Life Försäkrings AB, UK Branch

Personal Accident section
American International Group UK Limited (AIG UK)

The Admin Bureau Ltd, One Overstone Heights, Sywell, Northamptonshire, NN6 0AT

Date of Issue: 21 May 2025

ENDORSEMENTS

It is hereby agreed that the following endorsements are applicable to the attaching schedule of insurance:

Age limit endorsement:
Personal accident section only age limit increased to 85 years.