



Circular 056:05:07

To: Club Presidents Club Treasurers
Club Secretaries

Cc:

From: Meg Sparshott, Manager – Club Administration & Development

Date: 11 May 2007

Subject: Directors and Officers Insurance Policy for period July 2007-July 2008

Action: Completed Forms must be returned directly to Jardine Lloyd Thompson
By 22 June 2007 to ensure continuity of cover

Please find attached letter and declaration form from Jardine Lloyd Thompson, clubs must complete the declaration form and return to Jardine Lloyd Thompson by **22 June 2007**, to ensure that committee members and employers are covered for personal protection insurance.

For additional detail on this Circular contact: Meg Sparshott, Manager – Club Administration and Development
Email meg.sparshott@lifesavingvictoria.com.au or by phone (03) 9676 6931
Circulars are also available at www.lifesavingvictoria.com.au
Address: PO Box 353 South Melbourne DC 3205



JARDINE LLOYD THOMPSON

9 May 2007

IMPORTANT NOTICE

Jardine Lloyd Thompson Pty Ltd
ABN 69 009 098 864

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To Club Presidents

Directors & Officers Insurance & Employee Practices Insurance

Period of Insurance: 15th July 2007 to 15th July 2008

Policy No: FI00I634ZB4

Again this year as part of the renewal process each club must complete the attached declaration form.

Please return the form to this office no later than the 22nd June 2007.

As you are aware the primary purpose of the policy is to provide personal protection to Committee members and employees.

Please contact me should you have any queries.

Regards,

John Provan
Divisional Manager - Affinity

Encl:

- Declaration



JARDINE LLOYD THOMPSON

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Brisbane QLD 4001

Telephone (07) 3246 7555
Facsimile (07) 3246 7590

**DIRECTORS & OFFICERS INSURANCE DECLARATION
POLICY DUE – 15/07/2007**

NAME(SURF CLUB)

QUESTIONS

(Please answer all questions)

1. Number of Employees (Paid) :
Number of Volunteers (Committee Members Only) :

2. CLAIMS: (PLEASE TICK APPROPRIATE BOX)

(a) Is there any claim pending against any proposed Insured Person in their capacity as a director or officer of the Organisation? Yes No

(b) Do any circumstances exist that might give rise to a claim against any proposed insured? Yes No

(c) Is there any claim pending against the Organisation? Yes No

(d) Do any circumstances exist that might give rise to a claim against the Organisation? Yes No

(e) Has there been or is there now pending any investigation, examination, enquiry or other proceedings in relation to the affairs of the Organisation? Yes No

NOTE: (If you have answered Yes to a, b, c, d or e, please provide full details.)

3. If at the request of State Centre, Club or Branch an employee or committee member participates or is involved with another Organisation at the specific request of Surf Life Saving and requires cover for his/her involvement in that other Organisation, please provide details of that Organisation for consideration by Insurers. ***(Please attach a list)***

4. Employment Practices – Do any circumstances exist that might give rise to a claim against the Organisation. ***(If you have answered Yes please attach details.)*** Yes No

Signed: **Date:**/...../.....

Position:

(I declare that the above statement is true and that should any of the information given alter between the date of this declaration and the expiry date of the policy (shown above), I will give immediate notice thereof.)

N.B. Please return to Jardine Lloyd Thompson prior to the 22nd June 2007 to guarantee continuation of cover.