



# CONFIRMATION OF INSURANCE

#### NAME: MR FIT NESS

#### AFFILIATED INSTRUCTOR NO: JB007

This is to certify that the above-named, is a qualified Instructor affiliated to Fitness Industry Services CIC &/or Community Fitness Network Ltd and is covered by the following block arrangement to hold Group Exercise and/or Fitness Classes including Dance Fitness, Meditation, Boxercise, Jazzercise, Pole Fitness (excluding Aerial), Yoga & Belly Dancing, Rebounding and/or Personal Training which is extended to include the provision of Nutritional Advice and Sports Massage/Kinesis Tape & Pressure Therapy (excluding invasive treatments & where declared in addition), including delivery of online coaches and classes as well as delivery of training courses including/for qualifications and brand instructor training, where the individual is suitably qualified themselves to do so (and the appropriate cover level has been purchased / agreed).

Policy Period	12 months from
Insurer(s)	Sportscover Europe Ltd
Geographical Limits	Anywhere within Europe

#### Public & Products Liability / Professional Indemnity

Policy Number(s)	PLON99/0100152
Limit of Indemnity	GBP 10,000,000 any one occurrence in respect of Public Liability / Member to Member Liability
	GBP 10,000,000 in the aggregate in respect of Professional Indemnity
	GBP 10,000,000 in the aggregate in respect of Products Liability
	GBP 2,000,000 in the aggregate in respect of Abuse (where cover level selected)
Scope of Cover	Legal liability for damages and legal costs arising out of third-party loss, injury or damage in connection with the activities described above and notified to the insurers within the period. Cover includes Public Liability, Professional Indemnity, Libel & Slander, Abuse, Liability for damage to leased and rented premises, Member to Member Liability, Indemnity to Principals and Liability arising out of goods sold or supplied.

£250.00 but £1,000 in respect of Abuse

### **Sporting Kit & Equipment Insurance**

Excess

Policy Number(s)	PLON99/0100151
Limit of Indemnity	GBP 2,500
Scope of Cover	Physical Loss, Theft or Damage to the Property Insured, within the Geographical Limits shown
Excess	GBP 100.00
Vehicle Storage Condition:	Theft or Attempted Theft is Excluded from any unattended vehicle unless:
	<ul> <li>a. all doors and windows are closed and securely locked and the vehicle manufacturer's security systems are in operation;</li> </ul>
	b. entry to the vehicle has been effected by forcible and violent means;
	c. all items are stored out of sight in a locked boot or covered luggage area whilst in a vehicle that has been fully secured.

Group Personal Accident	
Policy Number(s)	PLON99/0100153
Scope of Cover	To cover all insured persons to the limits shown within the Schedule of Benefits, who suffer accidental bodily injury which causes death or disablement or results in medical expenses being incurred
Occupation	The employment, profession or occupation of or the business carried out by the insured person at the time of the Bodily Injury
Operative Time	Whilst playing, practicing and training under the auspices, control or direction of the insured including travelling to or from any such venue for the purposes of the above

# **Schedule of Benefits**

Description	Sum Insured (£)
Capital Benefits	20,000
Death (18+) Death (less than 18)	100% 25%
Loss of use of all sight in both eyes &/or total and irrecoverable loss of use of both hands or both feet or of one hand and one foot	100%
In respect of total and irrecoverable loss of use of one hand or one foot together with the total and irrecoverable loss of all sight in one eye	50%
In respect of total and irrecoverable loss of all sight in one eye or total and irrecoverable loss of use of one hand or one foot	25%
In respect of Permanent Total Disablement from gainful employment or gainful occupation for which the Insured Person is fitted for by education, training or knowledge (deferment period 12 months)	100%
Temporary Total Disablement / Loss of Income	50
Inconvenience Benefit	30 per day / maximum 50
Maximum Period	52 Weeks
Deferment Period	14 days
Medical Expenses - Hospital Accommodation - Ancillary Medical Expenses - Physiotherapy & Chiropractic - Dental Services to sound whole teeth	500 500 75% 500
Broken Bones *	250

\* We will only pay the amount shown below if as a result of having sustained Bodily Injury an Insured Person during the Operative Time fractures one or more of the bones listed below which necessitates a plaster cast applied by a hospital.

Arm (Humerus, Radius, Ulna) or Wrist (Carpals), Leg (Femur, Tibia, Fibula), Ankle (Tarsals) or Kneecap (Patella).

#### **Rolling Membership Basis**

An Insured Person may join the Insured Organisation at any time during the Period of Insurance and their cover under this policy will commence for a period of 12 months from their date of joining.

Cover will automatically renew for a further period of 12 months on their anniversary of joining the Insured Organisation.

If the policy is terminated by either the Insured Organisation or the Company, cover will continue for each Insured Person for a period of 12 months from the date of their joining or renewing their membership with the Insured in the preceding Period of Insurance.

Subject otherwise to the Terms Definitions Conditions and Exclusions of the Policy.

This letter is provided as a courtesy to our client as a matter of information only and confers no rights on the holder. Our duties in relation to this insurance are to our client and we accept no duty of care or responsibility to you or any other third party and any liability to you or any third party is excluded. This letter does not amend, extend or alter the coverage afforded by the policy (policies), nor does it purport to set out all of the terms, conditions and exclusions.

The policy terms, conditions, limits and exclusions may alter after the date of this document or the insurance may terminate or be cancelled, and the limits shown may be reduced by paid claims.

We have no obligation to advise you of any changes which may be made to the policies or to advise you of their cancellation or termination, however we would be pleased to confirm the current position upon request, in conjunction with the client.

Yours faithfully,

Daniel Abbott, <sub>Cert CII</sub> | Sales & Development Director Watkin Davies Insurance Consultants Ltd

Tel: 029 2062 6226 Email: <u>Sports@watkindavies.com</u> Web: <u>http://sports.watkindavies.com</u>

A master document showing the full details of the policy cover, exclusions terms and conditions is available along with Incident Notification and reporting guidelines. Incidents must be reported as soon as you are aware of them. Please refer in the first instance to the Fitness Industry Services CIC &/or Community Fitness Network Ltd.

Signed on behalf of Fitness Industry Services CIC &/or Community Fitness Network Ltd:

Brett Geargen

### **Conditions**

#### Sub-Contractors

It is a condition precedent to The Company's liability that all sub-contractors engaged by the Insured shall have in force and effect Public Liability Insurance for third party *Bodily Injury* or *Damage* to *Property* with a minimum limit of indemnity of £5,000,000 throughout the duration of their contract with the Insured.

The Insured shall undertake to obtain and retain documentary evidence of the said Insurances, prior to the commencement of any contract.

#### **Coaching Condition**

In respect of sports coaching; all coaches must be suitably qualified to coach the sport in question in accordance with the relevant recognised national governing body requirements, or where such a formal qualification does not exists, coaches must possess a minimum of three years' practical coaching experience for the sport in question.

# **Communicable Disease Endorsement**

This exclusion is applicable to the Public & Products Liability Section only.

It is understood and agreed that this Policy does not cover any loss caused directly or indirectly, contributed to, by, or attributable to a Communicable Disease or fear or threat of a Communicable Disease.

Communicable Disease means any disease capable of being transmitted from an infected person or species to a susceptible host, either directly or indirectly.

## POLE DANCING

The risk must comply with the following:

-The poles must be PDC recognised 'safe poles'

- -The instruction is part of a fitness regime
- -The classes are not to take place in a private residence of the instructor and/or client
- -The instructor is part of the IPDFA, PDC
- -The instructor has the relevant pole dancing qualifications

## EXCLUSION

Cover excludes all events, competitions, parties, shows, or other dancing for entertainment purposes.