



INTRODUCTION TO MARTIAL ARTS INSURANCE

Dear Instructor,

Thank you for considering our group martial arts insurance packages and other services. This page gives you a quick overview of the types of insurance and how they can be obtained. We have **member and non-member rates** however 99% of instructors see the value in becoming a member. This document is both an insurance application and has a MAA Member form included. It is important for instructors to meet the industry standards qualifications to make sure their insurance is valid.

Top 5 Benefits of getting your INSURANCE through us:

- 1 - It covers your club/business in all the right areas - (sparring / demos / fight shows etc)
- 2 - You get the cheapest price in the industry - and the most extensive cover.
- 3 - You know you are in safe hands - because we know martial arts and insurance
- 4 - You get Risk Management & other Business Manuals / Policies - for free
- 5 - We can guide you through the process of any incident - before you have to make a claim - Priceless!

Top 5 Benefits of MAA / IMA Membership:

- 1 - Instructor Certification brings greater credibility
- 2 - Cheapest Prices on Insurance (other group deals available)
- 3 - Access to Government Recognised Instructor Qualifications (subsidised prices)
- 4 - Lead generation club directory listing
- 5 - Business Resource Pack - (Risk Management / Marketing manuals / videos)

PLEASE READ THIS LEGAL DOCUMENT

Provide information that is accurate and truthful to the best of your knowledge as you would for any other insurance (financial services application). It is your responsibility to fill this form (all pages) correctly and makes sure it gets to us with payment before cover can be put in place. Insufficient information or missing pages or non-payment will delay the process and applications pending for more than 28 days are cancelled.

Arranging your insurance through **Martial Arts Australia (Graham Slater - Licensed AR)** means you have the best of both worlds, the experience in both martial arts (43 years) and insurance (16 years). **Longevity and experience brings credibility and confidence** so you know you are dealing with people that know your business and how to protect it. Being **ASIC Authorised Representatives (No: 419921)** it allows us to deal directly with the Insurers and process applications at discounted rates because we do most of the work.

Not sure how to fill out the form - Speak to someone now: 03 8601 1124

Once again thank you for considering **Martial Arts Australia Financial Services Group** for your insurance needs.

Graham Slater

MAA – Director / IMA Chairman / Australian Financial Services Authorised Representative – No: 419921
Working under licence of PSC Insurance Brokers – No: 342385
Phone: **03 8601 1124** E: support@martialartsaustralia.com.au



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Martial Arts Australia ACN 104 329 482 – (ABN 89 714 845 016) Graham Slater
 Australian Financial Services Authorised Representative – No: 419921
 Working under licence of PSC Insurance Brokers – No: 342385

INSURANCE APPLICATION FORM

SELECT THE TYPE OF INSURANCE YOU REQUIRE MATCHED TO YOUR QUOTATION **YES/NO**

STANDARD PACKAGE 1	10mil Public Liability (PL) 5mil Professional Indemnity (PI)	
STANDARD PACKAGE 2	20mil Public Liability (PL) 5mil Professional Indemnity (PI)	
PREMIUM PACKAGE 1	10mil (PL) & (PI) + Player Accident & Income Protection	
PREMIUM PACKAGE 2	20mil (PL) & (PI) + Player Accident & Income Protection	
BUSINESS PACK INFO	Property / Contents / Business Interruption / Glass Breakage REQUEST	

Name School/Association/Trading Entity:		
If using more entities add them:		
Instructor Name / Owner:		
POSTAL address:		Suburb:
State:	Post Code:	Contact:
Phone:	Mobile:	Email:
Number of Students/Members/Instructors to be covered- min 25	TOTAL	
Price quoted via phone / email	PRICE \$	

TICK

Bank Deposit: Westpac – A/C Name: Martial Arts Australia – BSB: 033 135 A/C No: 342 551	
Payment via Cheque made out to: ‘Martial Arts Australia’	
Credit card payment in full – (Please note a 1.5% transaction fee applies)	

Claims Information

	YES	NO
Has any insurer ever declined, refused to renew or imposed special conditions to any application, renewal or policy held or made by you.	Tick <input type="checkbox"/>	Tick <input type="checkbox"/>
Have any claims of Public Liability or Professional Indemnity been made against you in the last five years	Tick <input type="checkbox"/>	Tick <input type="checkbox"/>
Has any claims been made for Sports Injury / Personal Accident in the past five years	Tick <input type="checkbox"/>	Tick <input type="checkbox"/>

Special Notice: If yes to any of the above questions please supply separate information with this application

YES NO Standard Processing Time 48 hours DATE STARTS

MARK URGENT			Start my cover from	
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Office use only below

Date Received	Date Processed	Member No:	Confirmation Sent	Renewal / New	Payment	MAA Pack Sent

CHECK LIST

Have sent all the necessary pages? Minimum pages required – 2 – 4 pages

Send all correspondence to: *Martial Arts Australia*

Postal: P.O Box 1170 Box Hill VIC 3128

P: **03 8601 1124** E: support@martialartsaustralia.com.au



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STATUTORY NOTICE

A: YOUR DUTY OF DISCLOSURE - CONTRACTS OF GENERAL INSURANCE

Before you enter into a contract of general insurance with an insurer, you have a duty, under the Insurance Contracts Act 1984, to disclose to the Insurer every matter that you know, or could reasonably be expected to know, is relevant to the Insurer's decision whether to accept the risk of the insurance and, if so, on what terms. You have the same duty to disclose those matters to the Insurer before you renew, extend, vary or reinstate a contract of general insurance.

Your duty however does not require disclosure of any matter:-

- that diminishes the risk to be undertaken by the Insurer;
- that is of common knowledge;
- that your Insurer knows or, in the ordinary course of their business, ought to know;
- as to which compliance with your duty is waived by the Insurer.

NON DISCLOSURE

If you fail to comply with your duty of disclosure, the Insurer may be entitled to reduce their liability under the contract in respect of a claim or may cancel the contract. If your non-disclosure is fraudulent, the Insurer may also have the option of avoiding the contract from its beginning.

B: UTMOST GOOD FAITH

Every insurance contract is subject to the doctrine of utmost good faith which requires that parties to the contract should act toward each other with the utmost good faith. Failure to do so on your part may prejudice any claim or the continuation of cover provided by the Insurer.

C: CLAIMS MADE DURING THE PERIOD OF INSURANCE

This policy provides cover on a "claims made" basis, which means that claims first advised to you (or made against you) during the period of Insurance are covered, irrespective of when the incident causing the claim occurred.

D: NOT A RENEWABLE CONTRACT

Cover under this policy will terminate at expiry of the Period of Insurance specified in your policy document. If you wish to effect similar insurance for a subsequent period, it will be necessary for you to complete a new proposal form prior to the termination of the current policy so that terms of Insurance and quotation/s can then be developed for your consideration.

E: CHANGE OF RISK OR CIRCUMSTANCES

It is vital that you should advise us of any departure from your "normal" form of business (i.e. that which has already been conveyed to the Insurer). For example, acquisitions, changes in location or new overseas activities.

F: SUBROGATION

You may prejudice your rights with regard to a claim if, without prior agreement from the Insurer, you make agreement with a third party that will prevent the Insurer from recovering the loss from that, or another party. Your policy contains provisions that either exclude the Insurer from liability, or reduce their liability, if you have entered into any agreements that exclude your rights to recover damages from another party in relation to any loss, damage or destruction which would allow you to sustain a claim under this policy.

Declaration

This declaration must be completed and signed by or on behalf of all parties applying for insurance.

I/We a) Declare that:

- iii) The answers and information given by me/us in this questionnaire and any addendum are true and correct in all respects;*
- ii) I/We have read and understood the clauses detailed under the Important Notices section at the back of this questionnaire;*
- iii) If there was insufficient space to fully answer any questions, we have attached supplementary pages providing the additional information required.*

Signature

Witness

Date

PLEASE DATE AND SIGN BELOW:

Additional Information – Instructor Qualifications – locations – club listing - interested parties etc



**Martial Arts Australia – International Martial Arts Alliance
MEMBERSHIP APPLICATION**

Instructor Name:	Membership starts:	New Applicant :	Renewal Member:
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Club Name:	Street:
Type of Martial Arts:	Suburb:
Phone: Mobile:	State: Post Code:
Email:	Website:

Qualifications – This section below gives us a better idea on how to best help you meet current industry standards for instructor qualifications. Your details are kept confidential, please ask for a copy of our privacy policy.

Years Training		Years of school operation		Instructor rank		Instructor Title	
Do you have current First Aid Certificate		Have you done a NCAS coaching course		Have you done an AMACS coaching course		Have you done any other coaching course	
Do you have a weapons licence		Do you have a Working with Children Check / Permit / Blue Card		Do you use an Accident Register if a member gets hurt		Do you use a waiver for your students	

LET US KNOW WHAT WE CAN HELP YOU WITH

We have negotiated group deals on numerous products/services that are available to you as a member.

Insurance		School Recognition		Advertise Your Events	
IT – Web Design		Instructor Certification		Club Advertising	
Home Loans		Dan Grades – up-skill		Video Production	
Merchant Card Deals		Business Mentoring		Accountancy Support	
Fee Collection		Risk Mgr Consultancy		General Printing	

Membership Type – Please select the type of membership you would like as each level has additional benefits.

\$100.00 Bronze - Membership	\$195.00 Silver - Membership	\$295.00 Gold - Membership
<ul style="list-style-type: none"> *Access to Subsidised Services *Access to GROUP BUYING FACILITY *Access to MAA Mobile APP *Best Price on Insurance *Membership Certificate-PDF *Downloadable Business Pack *Regular Newsletter *Club Directory Listing *Invites To Business Webinars <p>BIZ PACK - ONLINE VERSION ONLY Extra Instructor Certifications \$15.00</p>	<ul style="list-style-type: none"> *Access to Subsidised Services *Access to GROUP BUYING FACILITY *Access to MAA Mobile APP *Best Price on Insurance *Downloadable Business Pack *Regular Newsletter *Club Directory Listing x 2 *Membership Certificate/Card Pack Business Pack – DVD *School Management Software *Qualify for Sponsorship *Bookkeeping Consultancy *Invites To Business Webinars <p>Extra Instructor Certifications \$25.00 MOBLIE CLUB APP – Value \$2000.00</p>	<ul style="list-style-type: none"> *Access to Subsidised Services *Access to GROUP BUYING FACILITY *Access to MAA Mobile APP *Best Price on Insurance *Downloadable Business Pack *Regular Newsletter *Club Directory Listing x 2 *Membership Certificate/Card Pack Business Pack – DVD *School Management Software *Qualify for Sponsorship *Bookkeeping Consultancy *Business Mentoring Session *Invites To Business Webinars *Feature Club Listings <p>Extra Instructor Certifications \$20.00 MOBLIE CLUB APP – Value \$2000.00</p>

PLEASE PUT YES or NO IN THE APPROPRIATE BOX BELOW FOR MEMBER TYPE

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Name	Rank	Name	Rank	Name	Rank

Martial Arts Certified Instructors (CPI Status) List above if required –
Reward your Instructors for supporting you by issuing them with their own *Certificate, Badge & Card*
Fill in the space above with Instructor Name / Rank with prices as per membership level.

If you need more space to list all your instructors please add a separate sheet with names typed out.
 Your assistant instructors are registered with us under your membership number so please supply:
Name – Rank with years of training (min 2 years qualified by the Chief Instructor)

MAKE A PAYMENT

Card Type:

Visa

MasterCard

Card Expiry Date:

/

Card Number:

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Card Holder Name:

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Signature:

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BANK DEPOSIT REFERENCE: (please use you name if possible)

PROVE YOU ARE QUALIFIED TO TEACH

Fill MAA Member form and enclose copies of any relevant certificates to substantiate your qualifications. If you need support in this area please discuss with a Team Member.	Provide a brief resume of your qualifications and experience that you feel deems you qualified to teach in the eyes of the Insurer. Include copies of your risk management - coaching policies / procedures.
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Send all correspondence to: *Martial Arts Australia – ABN: 84275 786 518*

Postal: P.O Box 1170 Box Hill VIC 3128

P: **03 8601 1124** E: support@martialartsaustralia.com.au

Our Office: Level 1 / 390 St Kilda Road Melbourne Victoria, AUSTRALIA

