

Group Personal Accident Insurance Policy Schedule

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Policy Number	NGPA 51738 2020
Insured Name	Lawn Tennis Association Ltd 'Coaches PA'
Insured Address	National Tennis Centre, 100 Priory Lane, Roehampton, London, SW15 5JQ
Subsidiary Companies	Not applicable
Business Description	Governing Body for British Tennis
Insured Person(s)	Category A: Any Accredited Coach of the Insured who is resident in the United Kingdom Category B: Any Accredited Plus Coach of the Insured who is resident in the United Kingdom
Age Limit	Category A: Under 75 years at the Policy Effective Date Category B: Under 75 years at the Policy Effective Date
Operative Time	Category A: This Insurance shall cover the insured Persons for Bodily Injury whilst involved in Coaching and Playing Tennis which is organised, recognised or authorised by the Insured Category B: This Insurance shall cover the insured Persons for Bodily Injury whilst involved in Coaching and Playing Tennis which is organised, recognised or authorised by the Insured
Endorsement(s) Applicable	Two
Geographical Limit	Worldwide
Reason for Issue	New Business
Security	Canopus Managing Agents Limited for Lloyd's Syndicates 4444 and 1861

Period of Insurance

Policy Effective Date	01 st October 2020
Policy Expiry Date	30 th September 2021
Date of Issue	30 th September 2020

Broker Details

Broker Agency Number	1717
Broker Name	Jo Dallaway
Broker Address	Howden UK Group Limited (London), 1 Creechurch Place, London, EC3A 5AF

Group Personal Accident Insurance Policy Schedule

Personal Accident Cover

Item	Benefit Payable in Respect of Accident	Sum Insured	
		Category A	Category B
1	Death	£20,000	£20,000
2	Permanent Total Loss of Sight of One Eye	£20,000	£20,000
3	Permanent Total Loss of Sight of Both Eyes	£20,000	£20,000
4	Loss of One or More Limb(s)	£20,000	£20,000
5	Permanent Total Loss of Speech	£20,000	£20,000
6	Permanent Total Loss of Hearing		
	(a) In One Ear	£5,000	£5,000
	(b) In Both Ears	£20,000	£20,000
7	Permanent Total Disablement	£20,000	£20,000
8	Temporary Total Disablement	Not Covered	75% Gross Weekly Wage
	Excess Period	Not Covered	21 Days
	Benefit Period	Not Covered	26 Weeks

Maximum Sums Insured

Maximum Sum Insured Any One Occurrence	£1,000,000
Maximum Sum Insured in respect of Item 1	The Sum Insured
Maximum Sum Insured in respect of Items 2, 3, 4, 5, 6(a) and 6(b)	The Sum Insured
Maximum Sum Insured in respect of Item 7	The Sum Insured
Maximum Sum Insured in respect of Item 8	The Sum Insured or £500.00 per week (whichever is the lesser)

Extensions

Item	Benefit Payable in Respect of Accident	Sum Insured	
		Category A	Category B
9	Coma Benefit	£50 per day payable up to 26 weeks	£50 per day payable up to 26 weeks
10	Dental Expenses	Up to £250	Up to £250
11	Disappearance Extension	Included within Item 1	Included within Item 1
12	Funeral Expenses	Up to £10,000	Up to £10,000
13	Hospital In Patient Expenses	£50 per day payable up to 26 weeks	£50 per day payable up to 26 weeks
14	Medical Expenses	Up to 20% of any claim paid under Items 1-8 up to a maximum of £3,000	Up to 20% of any claim paid under Items 1-8 up to a maximum of £15,000
15	Retraining Expenses	Up to £15,000	Up to £15,000

This Policy is signed on behalf of Underwriters



Peter Dewey
Director

AmTrust Underwriting Limited

Registered Office: AmTrust Underwriting Ltd, Exchequer Court, 33 St Mary Axe, London, EC3A 8AA

Registered in England No: 3908537

Authorised and regulated by the Financial Conduct Authority