

VOLUNTARY WORKERS PERSONAL ACCIDENT INSURANCE QUOTATION SCHEDULE

Following your recent submission, we are pleased to provide our terms based on the information provided to date.

The risk premium contained in this quotation reflects an assessment of the following (non-exclusive list) risk factors: Persons to be insured, benefits offered, previous claims histories and other contingent risks and exposures.

Premiums are exclusive of all taxes and charges and are for twelve months cover unless otherwise stated.

These terms are valid for 45 days from the date of issue or the expiry date of any existing cover, whichever comes first, provided that if there is any material alteration to the risk(s) described in the information provided or deterioration in the Insured's claims experience, we reserve the right to revise or withdraw these terms.

Cover as described in this Quotation does not attach until confirmed in writing by Arch Underwriting at Lloyd's (Australia) Pty Ltd.

POLICY NUMBER:	P0026914AH2025AU2
DATE OF PROPOSAL FORM:	13 March 2024
POLICY HOLDER:	Returned and Services League of Australia (NSW Branch) and/or nominated RSL sub branches RSL Custodian Pty Ltd The Policy Holder is the full legal name of the entity(ies) in whose name the policy will be issued, as well as any business or trading names..
ADDRESS OF THE POLICY HOLDER:	Level 2, 924 Pacific Highway Gordon Australia 2072
TYPE OF INSURANCE:	Voluntary Workers Personal Accident Insurance
POLICY WORDING:	Voluntary Workers Personal Accident Policy Wording and Product Disclosure Statement (PDS) - ARCHPDSVW2023V2
INSURANCE PERIOD:	31 May 2025 4.00pm to 31 May 2026 4.00pm local time at the address of the POLICY HOLDER
COVERED PERSONS:	Category 1: All declared VOLUNTARY WORKERS and including registered members of the POLICYHOLDER
OPERATIVE PERIOD OF COVER:	Category 1: Whilst undertaking voluntary work and participating in official sanctioned events on behalf of the POLICY HOLDER, including direct travel to and from
MINIMUM AGE LIMIT:	Category 1: 18
MAXIMUM AGE LIMIT:	Category 1: 95

Limit(s) of Liability

EVENT LIMIT OF LIABILITY:	All POLICY Sections	\$ 1,000,000
NON SCHEDULED FLIGHTS LIMIT OF LIABILITY:	All POLICY Sections	\$ 1,000,000
POLICY AGGREGATE LIMIT OF LIABILITY:	All POLICY Sections	\$ 2,000,000

Sections of Cover

CATEGORY

1

COVERED PERSONS

All declared VOLUNTARY WORKERS and including registered members of the POLICYHOLDER

OPERATIVE PERIOD OF COVER

Whilst undertaking voluntary work and participating in official sanctioned events on behalf of the POLICY HOLDER, including direct travel to and from

SECTION 1		PERSONAL ACCIDENT LUMP SUM BENEFITS	SUM INSURED
COVERED EVENT 1		ACCIDENTAL DEATH	\$ 30,000
COVERED EVENTS 2 - 26		As per Table of Benefits 1	\$ 30,000
COVERED EVENTS 27 - 33		BODILY INJURY resulting in FRACTURED Bones	\$ 2,000
COVERED EVENTS 34 - 35		BODILY INJURY resulting in LOSS of TEETH or dental procedures	Not Covered
SECTION 2		LOSS OF INCOME BENEFITS	SUM INSURED
COVERED EVENTS 36	TEMPORARY TOTAL DISABLEMENT as a result of BODILY INJURY		\$ 750 per week
	Maximum Percentage of SALARY		85 %
	Maximum BENEFIT PERIOD		104 weeks
	EXCESS PERIOD		7 days
COVERED EVENTS 37	TEMPORARY PARTIAL DISABLEMENT as a result of BODILY INJURY		\$ 750 per week
	Maximum Percentage of SALARY		85 %
	Maximum BENEFIT PERIOD		104 weeks
	EXCESS PERIOD		7 days
NON MEDICARE MEDICAL BENEFIT	Non Medicare Medical BENEFIT		\$ 2,000
	Non Medicare Medical Excess		\$ 50
	Maximum Percentage of reimbursement		85 %
SECTION 3		ADDITIONAL BENEFITS	SUM INSURED
3.1	Accidental HIV Infection BENEFIT		\$10,000
3.2	Bed Care BENEFIT		\$500 per week
		BENEFIT PERIOD 26 weeks	
		EXCESS PERIOD 48 hours	
3.3	Chauffeur BENEFIT		\$250 per week
		BENEFIT PERIOD 26 weeks	
3.4	Coma BENEFIT		\$500 per week
		BENEFIT PERIOD 26 weeks	
		EXCESS PERIOD 7 days	
3.5	Corporate Image Protection BENEFIT		\$10,000
3.6	Dependent Child Assistance BENEFIT		\$5,000 per DEPENDENT CHILD up to a maximum of \$20,000
3.7	Domestic Help Expenses BENEFIT		\$500 per week
		BENEFIT PERIOD 26 weeks	
		EXCESS PERIOD 7 days	
3.8	Education Fund BENEFIT		\$10,000
3.9	Family Accommodation and Transport Expenses BENEFIT		\$3,000
3.10	Funeral Expenses BENEFIT		\$10,000
3.11	Home and/or Motor Modification BENEFIT		\$10,000
3.12	Homemaker Assistance BENEFIT		\$200 per week
		BENEFIT PERIOD 26 weeks	
		EXCESS PERIOD 24 hours	
3.13	Independent Financial Advice BENEFIT		\$5,000
3.14	Miscarriage/Premature Childbirth BENEFIT		\$2,500
3.15	Out of Pocket Expenses BENEFIT		\$250 per week

BENEFIT PERIOD 26 weeks		
3.16	Partner/Spouse Retraining BENEFIT	\$25,000
3.17	Private Vehicle Excess BENEFIT	\$3,000
3.18	Rehabilitation BENEFIT	\$25,000
3.19	Rental Vehicle BENEFIT	\$3,000
3.20	Return to Work BENEFIT	\$25,000
3.21	Student Tutorial BENEFIT	\$500 per week
BENEFIT PERIOD 26 weeks		
3.22	Surviving Spouse/Partner BENEFIT	\$15,000
3.23	Terrorism Injury BENEFIT	\$20,000
3.24	Unexpired Membership BENEFIT	\$1,000
3.25	Work Experience BENEFIT	\$20,000
3.26	Workplace Assault BENEFIT	\$5,000
3.27	Workplace Trauma BENEFIT	\$5,000

Note: The **EVENT LIMIT OF LIABILITY**, **NON-SCHEDULED FLIGHT LIMIT OF LIABILITY** and **BENEFITS** payable apply in excess of any applicable **EXCESS PERIOD**.

ENDORSEMENTS**SECTION 2 - LOSS OF INCOME BENEFITS**

Where a benefit is payable under the POLICY under SECTION 2 - LOSS OF INCOME BENEFITS, EVENTS 36 and 37, the maximum BENEFIT PERIOD for any COVERED PERSONS is amended to:

- 1) 52 weeks for those aged sixty (60) to seventy nine (79)
- 2) 26 weeks for those aged eighty (80) to eighty nine (89)
- 3) 12 weeks for those aged ninety (90) to ninety five (95)

Except as otherwise provided in this endorsement, the Insuring Clause and all other POLICY terms and conditions shall have full force and effect.

Premiums

Base Premium	\$ 0
GST	\$ 0
Stamp Duty	\$ 0
Total Amount Payable by the POLICY HOLDER	\$ 0

Insurer:	Proportion:
Arch Underwriting at Lloyd's (Australia) Pty Ltd ABN 27 139 250 605 For and on behalf of Certain Underwriters at Lloyd's led by Arch Managing Agency Limited, Syndicate 2012	100%
UNIQUE MARKET REFERENCE:	B6060500000012025
AGREEMENT NUMBER	500000012025

This QUOTATION SCHEDULE is issued by the Service Company Coverholder shown above in accordance with the authority granted to them by Certain Underwriters at Lloyd's under the Agreement referred to herein.



Arch Underwriting at Lloyd's (Australia) Pty Ltd
For and on behalf of Certain Underwriters at Lloyd's
Signed at Sydney
12 May 2025

Arch Underwriting at Lloyd's (Australia) Pty Ltd

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