



This Insurance is arranged by Crotty Insurance Brokers Limited for the members of the Association of Coaching with an annual income up to €1,000,000. This proposal form must be completed by you honestly and accurately. You must disclose all information, circumstances and material which is, or may be, relevant to our consideration of your proposal for insurance.

1. Your details

Full name

Address 1

Postcode 1

Address 2

Postcode 2

Address 3

Postcode 3

If you have more than three addresses, please list all addresses on a separate sheet.

Telephone Mobile

Email

What is your estimated income for the forthcoming year? €

What is your estimated wage-roll for the forthcoming year? €

2a. Compulsory covers

For the purchase of this proposal form, you must purchase Professional Indemnity Insurance in order to purchase the optional covers noted below. All premiums shown on this proposal form are inclusive of insurance government levy of 5% and apply only if you can comply with the statement of fact in sections 3 and 4.

Professional indemnity – please select one of the following options:					
Annual Premium					
Annual Turnover	€325,000 limit	€650,000 limit	€1mil Limit	€1.5mil Limit	
<€50,000	€198	€249	€300	€350	
€50,001 - €0,000	€238	€300	€475	€525	
€250,001 - €1m	€400	€500	€650	€750	
*Professional indemnity limit basis is each claim or loss, defence costs in addition. Excess is €325					
Office Package					
Cover	Option 1	Option 2	Option 3	Option 4	Excess
Office Contents	€10,000	€20,000	€30,000	€50,000	€325
Portable Equipment (WW)	€2,500	€5,000	€7,500	€10,000	€325



Computer Equipment	€10,000	€15,000	€25,000	€50,000	€325
Increased Cost of Working	€10,000	€50,000	€100,000	€200,000	Nil
Employers Liability	Not Included	€13m	€13m	€13m	Nil
General Liability	€2.6m	€6.5m	€6.5m	€6.5m	€325
Commercial Legal	€130,000	€130,000	€130,000	€130,000	Nil
Premium	€210 <input type="checkbox"/>	€400 <input type="checkbox"/>	€600 <input type="checkbox"/>	€900 <input type="checkbox"/>	

Period of insurance

The premiums stated above represent the premiums due for a 12 month period of insurance.

3. Statement of fact By accepting this insurance you confirm that the facts stated below are true. These statements, and all information you or anyone on your behalf provided before we agreed to insure you, are incorporated into and form the basis of the policy.

If anything in these statements is not correct, or if any material information is not disclosed we will be entitled to treat this insurance as if it had never existed.

You should keep this a copy of this proposal acceptance form and statement of fact for your records.

1. The client's business description is listed below:
 - Corporate trainer
 - Training for Non-Manual Professions or soft skills training in non-manual environment
 - Part-time teaching, tutoring or lecturing
 - Executive development
 - Coaching or mentoring
 - Home tutor
 - Management Trainer
 - Music Teacher
 - Supply Teacher
 - Teacher
 - Training advisor and/or consultant
 - Training provider
 - Tutor
2. The client does not expect any significant changes to their business activities in the next 12 months
3. The client's business is registered and domiciled in the Republic of Ireland

4. At least one of the principals in the business has either:
 - A minimum of three years experience in the relevant trade, industry or profession; or
 - A university degree or a nationally recognised higher education qualification in the relevant trade, industry or profession
5. The client's annual turnover for the last complete financial year does not exceed €1,000,000
6. The client does not undertake any work where the Foreign office advise against all non essential travel
7. The client does not provide any advice on legal matters other than general employment or health and safety law advice
8. The client's business does not involve any of the following:
 - Any manual work or manual training
 - Any sporting activities
 - Any activities in or on water
 - Any groundworks at a depth of more than one metre
 - Any activities where the client or their customer, pupil or trainee is at a height exceeding three metres from ground level when outside a building or structure, or three metres from floor level when inside a building or structure
 - Any activities which involve the client or their customer, pupil or trainee moving or controlling any apparatus, plant or machinery at a height exceeding five metres from floor level when inside a building or structure
 - Any activities involving the use or application of heat other than the use of soldering irons or for the purposes of demonstrating fire extinguishing apparatus
 - Any activities involving mechanical restraints, weapons or munitions
 - Any black powder, pyrotechnics or explosives
 - Any mechanically propelled machinery, vehicles or rides other than fork lift trucks or tail lifts on trailers
 - Any animals
 - Any activities in or on blast furnaces, chimney or well shafts, viaducts, bridges, mines, refineries, off-shore installations, power stations, dams, tunnels, docks, wharves, piers, harbours, motorways, ships or steeples
 - Any activities which take place airside at airports, aerodromes or aircraft towers
 - Any activities which take place on rail tracks other than within protected areas on lines which have been closed to passenger traffic and the traction current is discharged
 - Any activities which take place in any restricted area of any motor sport track unless the client is always accompanied by a member of track staff
9. The client has not been convicted of or charged with any offence, other than a motoring offence or conviction spent under the Rehabilitation of Offenders Act 1974
10. The client has not had an insurance or proposal cancelled, withdrawn, declined or made subject to special terms
11. The client has not been declared bankrupt or become insolvent or made any voluntary arrangement with creditors or been subject to enforcement of a judgement debt either in a personal capacity or as a business, other than a cancelled or discharged bankruptcy
12. In the last five years the total value of all claims and losses is less than €1,000
13. The client is not aware, after enquiry, of any fact, circumstance, incident or escalating level of complaint which may give rise to a claim. This includes but is not limited to:
 - A shortcoming or problem in their work which cannot reasonably be put right
 - A complaint about their work or anything they have supplied which cannot be immediately resolved

An escalating level of complaint on a particular project

Any of their customers withholding payment to the client after a complaint

14. You are not a nursery, main stream school, college or university
15. That you are not carrying out work outside the EU
16. One or more of your Principals at least 3 years experience in the relevant industry.
17. You do not supply any products.
18. You do not expect any significant changes to your activities in the next 12 months and you do not provide any of the following services:
 - a. Management or supervision of children or vulnerable persons; unless you keep and maintain Garda Vetting which is renewed every three years
 - b. Medical advice, diagnosis or treatments
 - c. Financial, investment, accountancy or legal advice
 - d. Certification or regulation
19. Your employees are all permanent residents of the Republic of Ireland and you do not have any employees placed permanently outside of the Republic of Ireland

If you have requested cover for contents and business interruption:

1. all premises to be insured are based in the Republic of Ireland and predominantly constructed with external walls of brick, stone or concrete and roofed with slates, tiles or profile metal;
2. all premises to be insured are normally occupied as an office, meeting room, community centre, resource centre, training centre or retail unit which does not include warehouse or storage locations. The building is not left unused or unoccupied for more than 30 consecutive days other than bequeathed properties.
3. all premises to be insured have never been flooded and are not within 250 metres of any water source;
4. the electrical installation at every premises to be insured is inspected at least every five years by a qualified electrician and any defect remedied;
5. all premises to be insured are heated by a conventional electric, gas, oil or solid fuel heating system;
6. all waste materials are removed from all premises to be insured at least weekly.

Minimum security requirements

The following applies to all premises listed in section 1

1. The final exit door is secured by:
 - a. a mortice deadlock conforming to or superior to BS3621; or
 - b. a rim automatic deadlock conforming to or superior to BS3621; or
 - c. a key-operated multi-point locking system having at least three locking bolts.
2. Any other external door or internal door providing access to any part of the building not occupied by you, which is not officially designated a fire exit by the local fire authority, is secured by:
 - a. a locking device specified in 1 above; or
 - b. by two key-operated security bolts to engage the door frame.
3. Any other external door or internal door which is officially designated a fire exit by the local fire authority is secured by:
 - a. a panic bar locking system incorporating bolts which engage both the head and sill of the door frame; or
 - b. a mortice lock having specific application for emergency exit doors and which is operated

- from the inside by means of a conventional handle and/or thumb turn mechanism.
4. All ground and basement-level opening windows and any upper-floor opening windows or skylights accessible from roofs, balconies, fire escapes, canopies, downpipes and other features of the building are:
 - a. secured by means of a key-operated locking device; or
 - b. permanently screwed shut.

Please note:

- i. the local fire authority must be consulted before you replace or augment the existing locking device fitted to a designated emergency exit door; and
- ii. the provisions of specification 4 do not apply to windows or skylights that are protected by means of either:
 - a. fixed round or square section solid steel bars not more than 10cm apart; or
 - b. fixed expanded metal, weld mesh or wrought ironwork grilles; or
 - c. proprietary collapsible locking gate grilles.

If you have requested cover for commercial legal protection:

1. you have not made any previous claims in respect of commercial legal protection.

4. Claims and losses

You confirm the following statements to be true:

1. in the last three years, there have been no more than two claims or losses and the total value of all claims made is less than €1,000;
2. you are not aware of any fact, circumstance, incident, allegation or escalating level of complaint which may give rise to a claim;
3. you have not had any insurance or proposal cancelled, withdrawn, declined or made subject to special terms.



5. Insurance details

Important notice for your protection

Within 30 days of receipt of this proposal acceptance form by us, you will be sent your policy documents which contain full details of your cover and other important information. Please take time to read these documents carefully, particularly noting the policy exclusions and limitations.

Please ensure that the details in the policy documents are correct.

In the event that you change your mind you have 14 days to cancel the policy and, providing that no claims have been made, receive a full refund. After that period you can cancel your policy by giving 30 days notice.

6. Acceptance

I would like to proceed with cover to start on*

*Please note that you can choose for cover to commence on any date within 30 days from when you sign this form. The commencement date cannot be in the past. Your application will be rejected if you choose a commencement date in the past or more than 30 days in the future.

Please note that cover will only commence once you have received confirmation from Crotty Insurance Brokers Limited

I confirm that I have read the statement of fact and claims and losses sections above and I accept and agree the offer of insurance based on the cover and limits detailed above.

Yes No

If No, please speak to Crotty Insurance Brokers Limited

7. Material information

Please provide us with details of any information which may be relevant to our consideration of your proposal for insurance. If you have any doubt over whether something is relevant, please let us have details.

8. Data protection

By signing this proposal acceptance form you consent to Hiscox using the information we may hold about you for the purpose of providing insurance and handling claims, if any, and to process sensitive personal data about you where this is necessary (for example health information or criminal convictions). This may mean we have to give some details to third parties involved in providing insurance cover. These may include insurance carriers, third-party claims adjusters, fraud detection and prevention services, reinsurance companies and insurance regulatory authorities.

Where such sensitive personal information relates to anyone other than you, you must obtain the explicit consent of the person to whom the information relates both to the disclosure of such information to us and its use by us as set out above. The information provided will be treated in confidence and in compliance with the Data Protection Act 1998. You have the right to apply for a copy of your information (for which we may charge a small fee) and to have any inaccuracies corrected.

9. Declaration

I/We declare that (a) this proposal acceptance form has been completed after proper enquiry; (b) its contents are true and accurate and (c) all facts and matters which may be relevant to the consideration of my/our proposal for insurance have been disclosed.

I/We undertake to inform you before any contract of insurance is concluded, if there is any material change to the information already provided or any new fact or matter arises which may be relevant to the consideration of my/our proposal for insurance.

I/We understand that non-disclosure or misrepresentation of a material fact or matter will entitle the insurer to avoid this insurance.

I/We agree that this proposal acceptance form and all other information which is provided are incorporated into and form the basis of any contract of insurance.

Name

Position within the charity

Signature

Date

Please return this proposal acceptance form to Crotty Insurance Brokers Limited once it has been completed.

A copy of this proposal acceptance form and any other information supplied to us for the purposes of obtaining this insurance should be retained for your records.

10. Complaints

Our aim is to ensure that all aspects of your insurance are dealt with promptly, efficiently and fairly. At all times we are committed to providing you with the highest standard of service. If you have any questions or concerns about the sale of your policy or the service offered by your broker, you should contact Crotty Insurance Brokers limited:

Telephone: +35312908800

Email: TBC

Address:

Crotty Insurance Brokers Limited
Getcover House
6 Leopardstown Office Park
Off Burton Hall Avenue
Sandyford
Dublin 18
Republic of Ireland



If you have any questions or concerns about the terms of your policy or the decisions regarding the settlement of a claim, please contact our customer relations team in writing at:

Customer Relations
Hiscox SA (Irish branch)
The Observatory
7-11 Sir John Rogerson's Quay
Dublin 2
D02 VC42
REPUBLIC OF IRELAND

or by telephone on +353 1800 901 903
or by email at customerrelations.ireland@hiscox.com

If you remain dissatisfied after the internal dispute resolution process, you may have the right to refer your complaint to the Financial Services and Pensions Ombudsman.

The Financial Services and Pensions Ombudsman (FSPO) is an independent, impartial, fair and free service that helps resolve complaints with pensions providers and regulated financial services providers.

Contact details:
Financial Services and Pensions Ombudsman
Lincoln House
Lincoln Place
Dublin
D02 VH29

Phone: +353 1 567 7000
Email: info@fsp.ie
Web: www.fsp.ie

If you have purchased your policy online you can also make a complaint via the EU's online dispute resolution (ODR) platform. The website for the ODR platform is: <http://ec.europa.eu/odr>

Alternatively, you can also contact:

Commissariat aux Assurances
7, boulevard Joseph II
L-1840 Luxembourg
LUXEMBOURG
e-mail: caa@caa.lu

Insurance Ombudsman
ACA,
12, rue Erasme,
L - 1468 Luxembourg
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