



## Swimming Clubs and Schools – Proposal Form

Please ensure you answer ALL questions to enable us to obtain correct terms on your behalf. Where requested, please enter further details in the space provided. If there is insufficient space, please continue on a separate sheet of paper.

Which recognised body are you a member of?

PLEASE NOTE THAT COVER UNDER THIS POLICY IS SUBJECT TO ALL TEACHERS HOLDING A RECOGNISED QUALIFICATION.

### YOUR DETAILS

Name of Club/School:

Proprietors Name:

Trading Name:

Employee Reference Number (ERN):  
(this is your PAYE reference number if you have employees)

Person to contact:

Phone:

Email:

Correspondence Address:



[Redacted]

Business Description:

[Redacted]

PLEASE PROVIDE A FULL AND ACCURATE DESCRIPTION OF ALL CLUB ACTIVITIES

**GENERAL QUESTIONS**

Total Estimated Turnover:

£ [Redacted]

Number of Swimmers:

[Redacted]

DELETE AS APPLICABLE

Do you carry out any activities outside of England, Scotland, Wales, Channel Islands & the Isle of Man?

YES/NO

Do you undertake any of the following;- competitive diving- use of diving platforms- water polo- scuba diving or any other activity that required breathing apparatus- freediving

YES/NO

Do you generate more than 30% of your turnover from the sale or supply of products?

YES/NO

Do you supply any products outside of the European Union?

YES/NO

Do you arrange, host or provide any supervision for pool parties?

YES/NO

If YES, please complete Appendix 2. Pool Party Questionnaire

Do you arrange, host or provide any supervision for hydrotherapy?

YES/NO

If YES, please complete Appendix 3. Hydrotherapy Questionnaire

Do you arrange, host or provide any supervision for open water swimming?

YES/NO

If YES, please complete Appendix 4. Open Water Swimming



Questionnaire

Do you trade from your own pool facility?

YES/NO

If YES, do you lease time at the pool to other swimming clubs or swimming schools?

YES/NO

If YES, do you check and retain written records that all swimming clubs or swimming schools using your pool facilities carry Public Liability Insurance to at least £5,000,000 limit of indemnity?

YES/NO

**Has any Insurer ever**

Declined to insure you?

YES/NO

Cancelled or declined to renew any of you insurances?

YES/NO

Imposed special terms?

YES/NO

**Have you, the club or school, or any partner, director or any teacher, club or school official or helper etc. ever been**

Convicted of or charged (but not yet tried) with any criminal offence other than road traffic offences?

YES/NO

Declared bankrupt or insolvent?

YES/NO

A director or partner of a company that went into liquidation or receivership?

YES/NO

Prosecuted for a breach of any statute relating to health or safety of employees or others?

YES/NO

Served with a Prohibition Notice under the Health and Safety at Work Act?

YES/NO

The subject of a recovery action by Customs and Excise or the Inland Revenue?

YES/NO

The subject of a county court judgement made against you?

YES/NO



If YES to any of the above please give details

[Empty grey box for details]

Have you or any Partner or Director (in connection with this or any other business in which you or they have been trading) suffered any loss, made any claims or been involved in any accidents which have or could have resulted in a claim in respect of the risks proposed within the last five years?

YES/NO

Important: You must give details of all claims, even if they were declined by your previous insurers.

If YES, please give details

[Empty grey box for details]

OPTIONAL ITEMS

Please mark as yes if you require relevant cover to be included within the quotation:

Public and Products Liability

Please tick required sum insured

£5,000,000

£10,000,000

YES/NO

Abuse

If YES please tick required sum insured and complete attached Appendix. 5 Abuse Questionnaire

£2,500,000



£5,000,000

**Directors and Officers**

Please tick required sum insured

£50,000

£100,000

£250,000

£500,000

£1,000,000

£2,000,000

**Property Damage to Own Premises**

If YES, please complete the following;

YES/NO

Buildings Declared Value

£

Contents Declared Value including Pool Plant and Machinery

£

Engineering extension required?

YES/NO

**Terrorism**

YES/NO

**Specified All Risks**

If YES, tick required sum insured

YES/NO

£5,000

£10,000

£15,000

**Business Interruption**

YES/NO



Pool Plant and Machinery Extension (BI)

YES/NO

**Internet & Email**

If YES, is the website;

YES/NO

Non-interactive

Interactive

An Interactive website is one where the user has the ability to either carry out transactions or where users can generate content (forums etc.)

**Personal Accident**

If YES, please complete the following;

YES/NO

Number of Insured Persons:

Level of Benefit:

Bronze (Occupational Cover, £150 Weekly Benefit)

Silver (Occupation Cover, £250 Weekly Benefit)

Gold (Occupation Cover, £500 Weekly Benefit)

Platinum (24 Hour Cover, £500 Weekly Benefit)

**DECLARATION**

1. I/We declare that to the best of my/our knowledge and belief:

a) the above statements and particulars, whether written by me/us or by others on my/our behalf, are true and complete;

b) any statement or particulars which have been given separately by me/us or by others on my/our behalf are true and complete;

c) I/we have not withheld any material fact\*

d) no insurer has declined my/our proposal, cancelled or refused to renew my/our policy or increased



the premium or required special terms or conditions in respect of any of the risks proposed; and

e) all sums insured stated above represent the full value of the property to be insured.

2. I wish to modify the above statements in the following aspects

[Redacted area for modifications]

3. I/We agree that this proposal and declaration and any information given separately shall be the basis of the contract between Allianz Insurance plc and myself/ourselves.

4. I/We agree to accept the Allianz standard form of policy for this type of insurance.

5. I/We understand that Allianz reserves the right to decline any proposal.

6. I/We have read the Data Protection Act statement below and consent to data being used for the purposes specified.

Authorised Signature [Redacted]

Date [Redacted]

Position in company [Redacted]

\* Material facts are those facts which are likely to influence us in the acceptance or assessment of this proposal and it is essential that you disclose them. If you are in doubt about whether a fact is material, you should disclose it, since failure to do so could invalidate your policy.

Important:

Your Records

You should keep a record (including copies of letters) of all information you supply to Allianz about this proposal.



## Data Protection Act

Allianz Insurance plc together with other companies within the Allianz SE group of companies (“Allianz”) may use the personal and business details you have provided or which are supplied by third parties including any details of directors, officers, partners and employees (whose consent you must obtain) to:

- provide you with a quotation, deal with the associated administration of your policy and to handle claims;
- search credit reference, credit scoring and fraud agencies who may keep a record of the search;
- share with other insurance organisations to help offset risks, administer your policy, for statistical analysis, and to handle claims and prevent fraud;
- support the development of our business by including your details in customer surveys, for market research and business reviews which may be carried out by third parties acting on our behalf.

Allianz may need to collect and process data relating to individuals who may benefit from the policy (“Insured Persons”), which under the Data Protection Act is defined as sensitive (such as medical history of Insured Persons) for the purpose of evaluating the risk and/or administering claims which may occur. You must ensure that you have explicit verbal or written consent from the Insured persons to such information being processed by Allianz and that this fact is made known to the Insured Persons.

If your policy provides Employers Liability cover information relating to your insurance policy will be provided to the Employers Liability Tracing Office (the “ELTO”) and added to an electronic database, (the “Database”) in a format set out by the Employer’s Liability Insurance: Disclosure by Insurers Instrument 2010.

The Database assists individual consumer claimants who have suffered an employment related injury or disease arising out of their course of employment in the UK whilst working for employers carrying on, or who carried on, business in the UK and as a result are covered by the employers’ liability insurance of their employers, (the “Claimants”):

- I. to identify which insurer (or insurers) was (or were) providing employers’ liability cover during the relevant periods of employment; and
- II. to identify the relevant employers’ liability insurance policies.

The Database and the data stored on it may be accessed and used by the Claimants, their appointed representatives, insurers with potential liability for UK commercial lines employers’ liability insurance cover and any other persons or entities permitted by law.





The Database will be managed by the ELTO and further information can be found on the ELTO website [www.elto.org.uk](http://www.elto.org.uk)

Telephone calls may be recorded for our mutual protection, training and monitoring purposes.

Under the Data Protection Act 1998 individuals are entitled to request a copy of all the personal information Allianz Insurance plc holds about them. Please contact the Customer Satisfaction Manager, Allianz Insurance plc, 57 Ladymead, Guildford, Surrey, GU1 1DB.

Personal details may be transferred to countries outside the EEA. They will at all times be held securely and handled with the utmost care in accordance with all principles of English law.

By applying for and/or entering into this insurance policy you will be deemed to specifically consent to the use of your data and your insurance policy data in this way and for these purposes and that your directors, officers, partners, and employees have consented to our using their details in this way.