



Irish Rugby Football Union

Compulsory Group Personal Accident Scheme for Clubs

Application 2018/2019

N.B. This scheme is compulsory for all affiliated clubs including teams affiliated to the Irish Women's Rugby Football Union. To ensure cover is in operation this form must be completed and returned to your branch along with the appropriate premium. Cheques should be made payable to your Branch and crossed. It is important you respond to all questions.

(1) Name and address of Club _____

(2) IRFU Branch _____

(3) Name of club secretary _____

(4) Total number of playing members - Adult Male _____

Youth (male/female, age up to & incl. 21) _____ Adult Female _____

(5) Max number Adult teams (male/female) _____

(6) Number Youth teams incl. under 21's _____

(7) Name of mini teams _____

Premium Enclosed (no charge for Youth, Under 21s or Mini Teams)

No. of Adult Teams _____ @ Stg £1,767 per team = Total Stg £ _____

Declaration

We desire to insure in the terms of the contract entered into by the IRISH RUGBY FOOTBALL UNION as arranged by Aon. We do hereby warrant that the above statements and this Declaration are fully and truly made and that all the persons to be insured are to the best of our belief in good health and we hereby agree that this Declaration shall form the basis of the contract so far as this Club is concerned.

Date

Signed(for the Club)

This form must be returned to your Branch URGENTLY

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