

FAMILY COVER INSURANCE PLAN Application 2019

As a PSA/CPSU NSW member, you automatically have personal cover which is included in your subscription fee.

This form is to be completed only if you wish to take up additional family coverage.

The additional annual cost for the Family Extension cover is **\$11.00** (including Stamp Duty & GST). This cost is fixed regardless of the number of insured persons.

Coverage under this policy runs from 31 December 2018 until 31 December 2019. If your family joins mid-year, the cost is **\$11.00** from the date joined to 31 December 2019.

Your details

PSA / CPSU NSW Membership Number (if known)

Surname

Given names

Address

Suburb

State

Postcode

Phone number

Email

Date of birth

Important Information

1. The Family Accident Insurance Policy is arranged by: **Coverforce Insurance Brokers Pty Ltd, ACN 118 883 542 AFSL 302522**, and is issued by: **AIG Australia Limited ABN 93 004 727 753 AFSL 381686**
2. I have read the Product Disclosure Statement & Policy Wording pertaining to the above product/s and understand my duty of disclosure. To view the PDS & Policy Wording please consult the PSA or CPSU NSW website (www.psa.asn.au or www.cpsunsw.org.au) or email Srini_Gokul@coverforce.com.au
3. By signing this application form I consent to the use of my personal information as disclosed by AIG in the Product Disclosure Statement.
4. I understand and accept that coverage will immediately cease if I cease to be a financial member of the Public Service Association of NSW.

Authorisation by Insured

I wish to join/continue my participation in the Public Service Association of NSW Personal Accident Family Plan and enclose my completed application form together with my completed payment for **\$11.00**.

Signed (PSA/CPSU NSW Member) Date

Cheque/Money order
(payable to Public Service Association of NSW)

Credit Card
(complete details below)

Please send the completed form (along with payment of \$11.00) to:

Public Service Association of NSW
GPO Box 3365, Sydney NSW 2001

All cheques and money orders are to be made payable to *Public Service Association of NSW*.

Credit Card Payment

Card type Visa Mastercard

Card number

Cardholder name

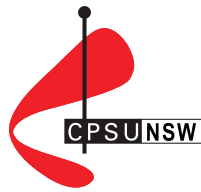
Expiry date

Amount **\$11.00**

The form may also be emailed to membership@psa.asn.au

Card Holder's Signature

Date



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Frequently Asked Questions

Where do I send my application form?

You should send your completed form together with a cheque/money order or credit card payment for **\$11.00** to the PSA at the address provided below.

Public Service Association of NSW
GPO Box 3365, Sydney NSW 2001

Where can I obtain a copy of the Policy Wording?

The Policy Wording is available on the PSA and CPSU NSW website www.psa.asn.au and www.cpsunsw.org.au

You can also request a copy from Coverforce Insurance Brokers by email: Srini_Gokul@coverforce.com.au and have the wording emailed or posted to you.

What does the policy cover?

You should refer to the Product Disclosure Statement and Policy Wording for full details of coverage, however, in brief the policy covers insured persons for permanent disability or death as a result of an accident. It does not cover sickness, medical expenses or income protection/salary continuance.

The policy also includes a 'Bed Care Benefit' which is a payment calculated daily for the time you are hospitalised (for more than 24 consecutive hours) as a result of an accident only.

How much am I covered for?

You should refer to the "Table of Events" which is on page 4 of the Product Disclosure Statement and Policy Wording for full details, however, in brief the sum insured for each adult as a result of death is \$30,000 along with a number of other benefits which are outlined in the "Table of Events".

The maximum benefit payable on the policy is in respect to Quadriplegia and Paraplegia, which is \$60,000. The Bed Care Benefit is \$50 for each day you are hospitalised. Subject to policy terms and conditions.

What is the definition of "Dependant Children"?

This is explained on page 10 of the Product Disclosure Statement and Policy Wording under the heading 'Dependent Children', however Dependent Children means your unmarried Children who are:

- (a) over six (6) months of age and under nineteen (19) years of age; or
- (b) under twenty-five (25) years of age while they are full-time students at an accredited institution of higher learning;

and at the time of an event giving rise to a claim are primarily dependent on You for maintenance and support.

Dependant Children includes step or legally adopted children.

How do I lodge a claim?

You should contact Jennifer Armodoros at Coverforce to obtain the appropriate claim form. Her contact details are as follows:

Jennifer Armodoros
Coverforce Insurance Broking
Phone: 02 9376 7864
Email: jennifer_armodoros@coverforce.com.au

You should refer to the Product Disclosure Statement & Policy Wording which is available on the PSA and CPSU NSW website for the full terms and conditions of the policy www.psa.asn.au and www.cpsunsw.org.au

The information contained in this document is general advice. That is, your personal objectives, needs or financial situations were not taken into account when preparing this information.

Accordingly, you should consider the appropriateness of any general advice we have given you, having regard to your own objectives, financial situation and needs before acting on it.

Where the information relates to a particular financial product, you should obtain and consider the relevant product disclosure statement before making any decision to purchase that financial product.

