

Our ref: IRIS21

18th June 2018

To Whom It May Concern

Confirmation of Insurance Cover

Insured: The Irish Squash Federation Ltd t/a Irish Squash and its member clubs

Period of Insurance: 11 June 2018 to 10 June 2019

Business Description: National Governing Body for Squash in Ireland

We act as Insurance Brokers to the above client and confirm that the following insurance has been arranged on their behalf which includes cover for their registered clubs and members as follows:

Insurance Type: Public Liability

Insurers: Irish Public Bodies Mutual Insurances Ltd.
Policy Number : CCP0002394
Limit of Indemnity : €6,500,000 any one occurrence, unlimited any one period of Insurance
Excess : €500 each and every claim Third Party Property Damage
Endorsements : **Abuse:** Limit of €1,300,000 aggregate any one period of insurance
Clubs indemnity: The indemnity provided under this policy extends to indemnify affiliated clubs and members of the National Governing Body

Insurance Type : Personal Accident Insurers:

Insurers: AIG Europe Ltd.
Policy Number : SMA66025
Insured Persons : All members of the policyholder
Covered Activities : Playing and training squash including any social activities organised by the policy holder
Operative Time: While an Insured Person is participating in a covered activity sponsored, organised or supervised by the Policyholder
Limits : Death & Capital Benefit €25,000
Medical expenses €2,000 (Max for physiotherapy is €350 or 6 sessions whichever is reached first)
Excess : The first €100 of each and every claim in respect of Medical Expenses

This document does not confer upon the addressee, recipient or holder any rights in the insurance nor does it set out the full terms, clauses, conditions, limits and exclusions of the Insurance. These statements have been made in good faith and are a summary of the insurance cover in force as at the date of this letter (which insurance remains subject to the full terms and conditions of the subscribing insurers' policy), although the Limit of Indemnity may have been impaired by incurred claims and therefore may vary from the amount shown. We accept no responsibility whatsoever for any inadvertent or negligent act, error or omission on our part in preparing these statements or for any loss, damage or expenses thereby occasioned to any recipient of this letter. The information contained in this letter should be treated as confidential.

Should the insurance cover be cancelled, assigned or changed in any way during the period of insurance, neither we nor the subscribing insurer(s) accept any obligation to notify any recipient of this letter.

The subscribing insurers' obligations under contracts of insurance to which they subscribe are several and not joint and are limited solely to the extent of their individual subscriptions. The subscribing insurers are not responsible for the subscription of any co-subscribing insurer who for any reason does not satisfy all or part of its obligations.

Notwithstanding the issuance of this letter we are and remain solely the agent of our Client in this matter and owe no duties to any recipient of this letter.



Joy Lennon

Signed:

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