

# Certificate of Currency

## VOLUNTARY WORKERS ACCIDENT INSURANCE

We confirm cover has been arranged through Blend Insurance Solutions for the period specified below subject to the terms and conditions of the Policy.

This Certificate of Currency is issued as a matter of information only and confers no rights on the certificate holder.

This Certificate of Currency does not form part of the terms and conditions of the policy and does not amend, extend, replace or alter the terms, conditions, definitions, limitation or exclusions contained therein. Please read the Product Disclosure Statement, policy schedule and any other documents forming the policy for the terms and conditions of cover.

This Certificate of Currency is provided as a summary of cover only and is current only at the date of issue. The policy may be subsequently altered or cancelled in accordance with its terms after the date of issue of this notice without further notice to the holder of this notice.

**Policy Number**

BLVWP23020920235-3

**Issue Date**

25/02/2026

**Insured**

Archery Australia Limited

**Period of Insurance**

From: 01/03/2026 To: 01/03/2027  
Both at 4pm AEST

**Insured Person**

All persons undertaking Voluntary Work on behalf of the Insured who meet the conditions of an Insured Category

**PDS version**

Blend.VNW.0925

**Risk Location**

NSW

**Endorsements**

Yes

**Insurer**

Allied World Assurance Company, Ltd  
(ABN: 54 163 304 907)

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**Category 1**

**Category Name**

All Insured Persons

**Description of Voluntary Work**

Principally Archery Sports Administration, competitions (local and overseas), Social Events, Producing Archery Magazine, Training and Instruction, Try Out Days and associated practice

**Operative Time**

whilst engaged in Voluntary Work including Direct Travel

**Operative Time description**

**Geographical Limit**

Australia

**Maximum Age**

90

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## Summary of Benefits Table

Section	Name	Benefits
<b>1. Personal Injury</b>		<b>Category 1</b>
<b>Part A</b>	<b>Lump Sum Benefits</b>	Included
	Event 1	\$150,000
	Events 2-19	\$ 150,000
<b>Part B</b>	<b>Weekly Benefits - Injury</b>	<b>included</b>
	Maximum percent of gross weekly income	85%
	Maximum weekly benefit amount	\$ 700
	Maximum benefit period (weeks)	104 weeks
	Waiting Period (days)	7 days
<b>Part C</b>	<b>Injury Resulting in Fractured Bones</b>	<b>\$ 3,000</b>
<b>Part D</b>	<b>Injury Resulting in Loss or Damage to Teeth</b>	<b>\$ 1,000</b>
<b>2. Personal Wellbeing</b>		
<b>2A</b>	<b>Accidental HIV Infection Benefit</b>	<b>\$ 30,000</b>
<b>2B</b>	<b>Accommodation and Transport Benefit</b>	<b>\$ 2,000</b>
<b>2C</b>	<b>Advanced Payment</b>	<b>included</b>
<b>2D</b>	<b>Childcare Benefit</b>	<b>\$ 2,000</b>
<b>2E</b>	<b>Coma Benefit</b>	<b>included</b>
	Daily benefit amount	\$ 100
	Maximum benefit period (days)	90 days
<b>2F</b>	<b>Dependent Child Benefit</b>	<b>included</b>
	Benefit amount per Dependent Child	\$ 5,000
	Maximum benefit amount per family	\$ 15,000
<b>2G</b>	<b>Domestic Help Benefit</b>	<b>included</b>
	Maximum weekly benefit amount	\$ 250
	Maximum benefit period (weeks)	52 weeks
<b>2H</b>	<b>Education Fund Benefit</b>	<b>included</b>
	Benefit amount per Dependent Child	\$ 5,000
	Maximum benefit amount per family	\$ 15,000
<b>2I</b>	<b>Escalation of Claim Benefit</b>	<b>included</b>
<b>2J</b>	<b>Home Care Benefit</b>	<b>included</b>
	Maximum weekly benefit amount	\$ 1,000
	Maximum benefit period (weeks)	12 weeks
<b>2K</b>	<b>Hospitalisation Waiting Period Benefit</b>	<b>included</b>
<b>2L</b>	<b>Independent Financial Advice</b>	<b>\$ 10,000</b>
<b>2M</b>	<b>Modification Benefit</b>	<b>\$ 15,000</b>
<b>2N</b>	<b>Non-Medicare Medical Expenses</b>	<b>included</b>
	Maximum benefit amount	\$ 5,000
	Percentage of eligible Non-Medicare Medical Expenses We will reimburse	85%
	Excess applicable each and every claim	\$ 50
<b>2O</b>	<b>Orphan Benefit</b>	<b>included</b>
	Benefit amount per Dependent Child	\$ 5,000
	Maximum benefit amount per family	\$ 15,000
<b>2P</b>	<b>Rehabilitation Benefit</b>	<b>\$ 20,000</b>
<b>2Q</b>	<b>Spouse/Partner Retraining Benefit</b>	<b>\$ 20,000</b>
<b>2R</b>	<b>Student Tutorial Benefit</b>	<b>included</b>
	Maximum weekly benefit amount	\$ 250
	Maximum benefit period (weeks)	not included
<b>3. Corporate Protection</b>		
<b>3A</b>	<b>Chauffeur Benefit</b>	<b>\$ 2,000</b>
<b>3B</b>	<b>Corporate Image Protection</b>	<b>\$ 2,500</b>
<b>3C</b>	<b>Disappearance</b>	<b>included</b>
<b>3D</b>	<b>Funeral Expenses Benefit</b>	<b>\$ 5,000</b>

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**Aggregate Limit of Liability**

<b>Per Event</b>	<b>\$ 2,000,000</b>
<b>Per Period of Insurance</b>	<b>\$ 2,000,000</b>

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