

Golfsure Personal

Master Policy

In consideration of the Insured named in the Schedule hereto paying to the Insurer the premium as stated in the said Schedule the Insurer agrees to provide insurance in the terms of this Policy.

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SIGNED on behalf of the Insurer

Chartis Insurance Ireland Limited is regulated by the Financial Regulator.

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Policy Definitions

The following Definitions apply to the entire Policy. Additional Definitions specific to each Section are set out therein.

1. Golf Club Premises shall mean the clubhouse and golf course area (including car park area of the clubhouse).
2. Insurer shall mean Chartis Insurance Ireland Limited.
3. Operative Time shall mean whilst the Insured is playing golf or on Golf Club Premises and further extends to include whilst attending any meeting of the Insured's golf club or attending any meeting or function on behalf of or as a representative of the Insured's golf club whether on a Golf Club Premises or not, excluding whilst commuting to and from such meetings or functions.
4. Period of Insurance shall mean the period of insurance stated in the Schedule or any subsequent period in respect of which the Insured shall have paid and the Insurer shall have accepted the premium required for the renewal of this Policy.

SECTION 1

Golf Equipment/Personal Effects

Insuring Agreement

If, during the Period of Insurance, any of the Property Insured described in the Schedule hereto be accidentally lost, destroyed or damaged other than by an excluded cause the Insurer will pay to the Insured the value of the property at the time of the happening of its accidental loss or destruction or the amount of such accidental damage (accidental loss, destruction or damage being hereafter termed Damage) or at its option reinstate or replace such property or any part thereof provided that:-

the liability of the Insurer in any one period of insurance shall in no case exceed –

- (a) in respect of each item the sum expressed to be insured thereon or in the whole the total sum insured thereby
- (b) any limit of liability shown in the Schedule or such other amount as may be substituted therefor by memorandum hereon signed by or on behalf of the Insurer.

Definitions applicable to Section 1

The following Definitions apply to this Section in addition to the Definitions that apply to the entire Policy:

1. Golf Equipment shall mean golf clubs, golf club bags, Skycaddies, caddy cars, golf shoes, golf waterproofs, golf hats, golf gloves and golf carry bags (for bringing clothes, etc.).
2. Personal Clothing shall mean watches, jewellery, jackets, jumpers, shirts, trousers and ordinary shoes.

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Exclusions applicable to Section 1

This Section does not cover:-

1. Damage caused by:
 - (a) faulty or defective design, materials or workmanship, inherent vice, latent defect, gradual deterioration or wear and tear
 - (b) corrosion, rust, change in temperature, dampness, dryness, wet or dry rot, shrinkage, evaporation, loss of weight, contamination, change in colour or flavour or texture or finish, vermin, insects, marring or scratching
 - (c) infidelity or dishonesty of the Insured, nor Damage resulting from the Insured voluntarily parting with title or possession of any property
 - (d) mechanical or electrical breakdown and/or derangement of machinery or equipment
 - (e) pollution or contamination except (unless otherwise excluded) destruction of or damage to the property insured caused by
 - (i) pollution or contamination which itself results from Damage as within defined
 - (ii) Damage as within defined which itself results from pollution or contamination.
2. Damage to property as a result of its undergoing any process of repairing, restoring or dyeing.

Conditions applicable to Section 1

The following Conditions apply to this Section in addition to the Conditions that apply to the entire Policy. The titles of these paragraphs are for convenience only and do not lend any meaning to this contract.

1. **Automatic Reinstatement Following Loss**
In the absence of written notice by the Insured or the Insurer to the contrary the Insurer's liability under this Section shall not stand reduced by the amount of any loss.
2. **Claims**
 - (a) On the happening of any Damage the Insured shall give immediate notice thereof in writing to the Insurer.
 - (b) In respect of Damage caused by theft it is a condition precedent to any claim that immediate notice of the theft shall have been given by the Insured to the police authority in the country where the Damage or theft occurred.
 - (c) The Insured shall within 30 days after any Damage or such further time as the Insurer may in writing allow at the expense of the Insured deliver to the Insurer a claim in writing containing as particular an account as may be reasonably practicable of the several articles or portions of property damaged and of the amount of Damage thereto respectively having regard to their value at the time of the Damage together with details of any other insurances on any property hereby insured. The Insured shall also give to the Insurer all such proofs and information with respect to the claim as may reasonably be required together with (if

demand) a statutory declaration of the truth of the claim and of any matters connected therewith. No claim under this Section shall be payable unless the terms of this Condition have been complied with.

3. **Contribution**
If at the time of any Damage to any property insured under this Section there be any other insurance effected by or on behalf of the Insured covering any of the property damaged, the liability of the Insurer hereunder shall be limited to its rateable proportion of such Damage. If any other insurance effected by or on behalf of the Insured is expressed to cover any of the property hereby insured but is subject to any provision whereby it is excluded from ranking concurrently with this Policy either in whole or in part or from contributing rateably to the Damage the liability of the Insurer hereunder shall be limited to such proportion of the Damage as the sum hereby insured bears to the value of the property.
4. **Deductible**
This Section does not cover the amount(s) of the deductible(s) stated in the Schedule in respect of each and every loss as ascertained after the application of all other terms and conditions of the Policy including any condition of Average.
Warranted that the Insured shall not effect insurance in respect of the amount(s) of the deductible(s) stated in the Schedule.
5. **Reinstatement**
If the Insurer becomes bound to replace any property the Insured shall at the Insured's own expense produce and give to the Insurer all such receipts and information as the Insurer may reasonably require. The Insurer shall not be bound to replace exactly or completely but only as circumstances permit and in reasonably sufficient manner and shall not in any case be bound to expend in respect of any one of the items insured more than the sum insured thereon.
6. **Rights of the Insurer**
On the happening of any Damage in respect of which a claim is or may be made under this Section the Insurer and every person authorised by the Insurer may without thereby incurring any liability and without diminishing the right of the Insurer to rely upon any conditions of this Policy enter, take or keep possession of the building or premises where the Damage has happened and may take possession of or require to be delivered to them any of the property hereby insured and may keep possession of and deal with such property for all reasonable purposes and in any reasonable manner. This Condition shall be evidence of the leave and licence of the Insured to the Insurer so to do. If the Insured or anyone acting on behalf of the Insured shall not comply with the requirements of the Insurer or shall hinder or obstruct the Insurer in doing any of the above-mentioned acts then all benefit under this Section shall be forfeited. The Insured shall not in any case be entitled to abandon any property to the Insurer whether taken possession of by the Insurer or not.

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Extensions applicable to Section 1

1. **Golf Buggies**
The insurance by this Section extends to include Damage not otherwise excluded to single-seater ride-on golf buggies caused while being used in circumstances which do not require insurance under the provisions of the Road Traffic Acts or any amending legislation and where cover is not afforded under any other policy, subject to a limit of €4,000 in respect of any one occurrence.
2. **Eagle (Par 3 or 4 only) or Albatross**
The Insurer will indemnify the Insured's golf club in respect of the Insured's bar receipts for a gross Eagle (excluding at a par 5 hole) or Albatross, as defined below, in an Official Club Competition, Official Affiliated Golf Society Competition or Golfing Union of Ireland Competition subject to confirmation by Golf Club Secretary up to a limit of €250. In respect of this Extension no deductible will apply.
Eagle shall mean a hole-in-one at a par 3 hole or a score of 2 at a par 4 hole, gross and not net of handicap. (There is no cover under this Extension for an Eagle at a par 5 hole.)
Albatross shall mean a hole-in-one at a par 4 hole or a score of 2 at a par 5 hole, gross and not net of handicap.
In respect of Golfers under 18 years of age, this policy will indemnify the Insured's golf club in respect of Professional Shop voucher to a maximum of €100
3. **Loss of Keys**
The insurance by this Section extends to include the cost of replacing car keys, the property of the Insured, lost whilst on Golf Club Premises. In respect of this Extension no deductible will apply.
4. **Mobile Phones**
The insurance by this Section extends to include Damage to personal mobile telephones, the property of the Insured, whilst on Golf Club Premises, subject to a limit of €100 in respect of any one occurrence. In respect of this Extension no deductible will apply.
5. **Delayed Arrival of Golf Clubs**
The insurance by this Section extends to include the cost of renting Golf Clubs only when abroad because of non-arrival/delayed arrival subject to a limit of €250.
6. **GPS/Golf Satellite Rangefinders/Skycaddies**
The insurance by this Section extends to include Damage to GPS Skycaddies, the property of the Insured limited to €400 in respect of any one occurrence.

SECTION 2

Personal Liabilities

Insuring Agreement

In the event of

1. accidental Bodily Injury to any person
2. accidental Damage to property other than property belonging to the Insured or in the Insured's custody or control

caused during the Operative Time and within the Period of Insurance the Insurer will, subject to the Limit of Indemnity, indemnify the Insured in respect of legal liability incurred in connection with such Bodily Injury or Damage.

The Insurer will also pay all costs and expenses incurred with its written consent in respect of a claim against the Insured for damages and claimants' costs and expenses to which the indemnity expressed in this Section applies. Such costs and expenses shall be included within the Limit of Indemnity as stated in the Schedule or endorsed hereon.

Definitions applicable to Section 2

The following Definitions apply to this Section in addition to the Definitions that apply to the entire Policy:

1. Bodily Injury shall mean accidental bodily injury including death, illness or disease. It shall include, but not by way of limitation, mental injury, anguish and shock.
2. Damage shall mean physical damage including physical loss, nuisance, trespass or obstruction.
3. Occurrence(s) shall mean an event including continuous or repeated exposure to substantially the same harmful conditions which results in Bodily Injury or Damage to property.
4. The Insured shall mean that as detailed in the Schedule or as endorsed hereon and shall include in the event of the death of the Insured any personal representative of the Insured in respect of liability incurred by the Insured.

Exclusions applicable to Section 2

The Insurer shall not be liable for

1. Damage to property or Bodily Injury to persons caused by any aircraft, waterborne vessel, craft or mechanically propelled vehicle whilst being used in such a manner as to render the Insured liable under the provisions of any Road Traffic Legislation.
2. Damage to property or Bodily Injury to persons which attaches because of an Agreement but which would not have attached in the absence of that Agreement.
3. Claims brought against the Insured in any Court of Law other than in the Republic of Ireland, Great Britain, Northern Ireland, the Isle of Man or the Channel Islands.
4. Liability arising from a deliberate wilful act or omission of the Insured and which could reasonably have been expected having regard to the nature and circumstances of such act or omission.
5. Bodily Injury to any person and/or Damage to property caused by or in connection with or arising from
 - (a) libel or slander or infringement of plans, copyright, patent, trade name, trade mark or registered design
 - (b) pollution or contamination of air, water or soil within the territories of the United States of America or Canada.

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Conditions applicable to Section 2

The following Conditions apply to this Section in addition to the Conditions that apply to the entire Policy. The titles of these paragraphs are for convenience only and do not lend any meaning to this contract.

thereupon all liability of the Insurer in respect thereof or arising therefrom shall be suspended until such defect or danger be altered to the satisfaction of the Insurer.

1. **Claims**

- (a) The Insured shall give notice to the Insurer as soon as possible of any Occurrence likely to give rise to a claim with full particulars thereof. Every letter, claim, writ, summons and/or process shall be notified and forwarded to the Insurer immediately on receipt. Notice shall also be given to the Insurer immediately after the Insured shall have knowledge of any incident, prosecution or inquest in connection with any Occurrence for which there may be a liability under this Section.
- (b) No admission, repudiation, offer, payment or indemnity shall be made or given by or on behalf of the Insured without the written consent of the Insurer which shall be entitled if it so desires to take over and conduct in the name of the Insured the defence or settlement of any claim or to prosecute in the name of the Insured for its own benefit any claim for indemnity or damages or otherwise and shall have full discretion in the conduct of any proceedings and in the settlement of any claim and the Insured shall give all such information and assistance as the Insurer may require.

2. **Contribution**

If at the time of the happening of any Occurrence covered by this Section of the Policy there is any other existing insurance whether effected by the Insured or not covering the same liability the Insurer shall not be liable to indemnify the Insured in respect of such liability except so far as concerns any excess beyond the amount which would have been payable under such other insurance had this Policy not been effected.

3. **Deductible**

All claims against the Insured for loss, damage or expense arising out of one Occurrence or series of claims arising out of one Occurrence shall be adjusted separately and from the amount of each adjusted claim the sum indicated in the Schedule shall be deducted.

4. **Limit of Indemnity**

The liability of the Insurer under this Section for all damages payable to any claimant or any number of claimants in respect of or arising out of one Occurrence or in respect of or arising out of all Occurrences of a series consequent on or attributable to one source or original cause shall not exceed the amount specified as the Limit of Indemnity in the Schedule.

5. **Suspension of Cover**

The Insurer shall at all reasonable time have free access to inspect any property and in the event of any defect or danger being apparent to the Insurer, the Insurer may give notice in writing to the Insured and

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SECTION 3

Personal Accident

Insuring Agreement

If an Insured sustains Bodily Injury during the Operative Time and within the Period of Insurance which results within two years solely and independently of any other cause in death, Loss of Limb, Loss of Sight, Loss of Hearing, Permanent Total Disablement, Temporary Total

Disablement, Medical Expenses, Fractures, Dental Expenses, Facial Scarring, Hospitalisation or Coma, the Insurer will pay the Insured the appropriate amount shown in the Schedule of Benefits below.

Schedule of Benefits

ITEM	BENEFIT
1. Accidental death	€150,000
2. Loss of Limb or Loss of Sight of one Eye	€150,000
3. (a) Loss of Limb (two or more) and/or Loss of Sight in both eyes or one of each	€150,000
3. (b) (i) Loss of Hearing in both ears	€150,000
3. (b) (ii) Loss of Hearing in one ear	€ 37,500
4. Permanent Total Disablement	€150,000
5. Temporary Total Disablement	€250 per week
6. Medical Expenses	€3,300 Republic of Ireland; €30,000 elsewhere
7. Dental Expenses	€10,000
8. Hospitalisation payable per day up to max 20 days	€50
9. Coma payable per week for each full week of continuous unconsciousness up to max 26 weeks	€100
10. (a) Facial Scarring – length 10cm or longer	€3,000
10. (b) Facial Scarring – length between 3cm and 9cm	€1,500
11. Fracture or Fractures	
(a) of the vertebral column (other than the coccyx)	€1,500
(b) of the pelvis	€1,200
(c) of the skull (other than the nose and teeth), breast bone, ankle or one or more bones of the leg (femur, patella, tibia and fibula)	€500
(d) of the collar bone, elbow, wrist or one or more bones of the arm (humerus, radius and ulna)	€250
(e) of a rib or coccyx	€100
(f) of one or more bones of the hand, fingers, foot, thumbs, toes, the nose or any bone not specifically covered under items (a) to (e) above	€40
Any One Accident Limit	€5,000,000

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Provisions applicable to the Benefits

1. Death, Loss of Limb, Loss of Sight, Loss of Hearing, Permanent Total Disablement, Temporary Total Disablement, Medical Expenses, Fractures, Dental Expenses, Facial Scarring, Hospitalisation or Coma resulting from exposure to the elements will be considered to have been caused by Bodily Injury.
2. No benefit will be payable in respect of any one accident under more than one of Items 1 - 4 on the Schedule of Benefits.
3. The benefit under Item 1 for an Insured under 18 years of age will be limited to €50,000 except where the Insured, aged between 16 and 18 years of age at the time of sustaining Bodily Injury, is in full-time Gainful Employment. The benefit under Item 1 for an Insured over 65 years of age is limited to €50,000.
4. No benefit will be payable under Item 5 for the 1st 14 days of disablement and thereafter for no more than 104 weeks in total. The benefit payable shall not exceed more than 75% of the Insured's total weekly Income, including Income from other sources.
5. The benefit under Item 5 will only be payable where the Insured, aged between 16 and 70 years of age at the time of sustaining Bodily Injury, is in full-time Gainful Employment.
6. The benefit under Item 4 is reduced to NIL where the Insured is over 65 years of age. Item 5 is reduced to Nil where the Insured is over 70 years of age.
7. The benefits under Items 2 and 3 are reduced by 40% where the Insured is over 75 years of age.

Definitions applicable to Section 3

The following Definitions apply to this Section in addition to the Definitions that apply to the entire Policy:

1. Any One Accident Limit shall mean the maximum the Insurer will pay in the aggregate under this and any other policy of Personal Accident Insurance issued by the Insurer in the Insured's name in respect of all Insureds suffering Bodily Injury in the same accident or series of accidents contributed to, caused by or consequent upon the same original cause, event or circumstance. If a claim exceeds the Any One Accident Limit the Insurer will pay an amount which is proportionately reduced until the total does not exceed the limit.
2. Bodily Injury shall mean injury to the body caused by an accident and not by any gradual cause. It does not include:
 - (a) sickness or disease unless this results from injury to the body;
 - (b) post-traumatic stress disorder; or
 - (c) a psychological or psychiatric illness or condition.
3. Coma shall mean a state of deep prolonged unconsciousness in which an individual is incapable of sensing or responding to external stimuli and internal needs.
4. Dental Expenses shall mean treatment necessary to restore or replace sound natural teeth lost or damaged as a result of Bodily Injury, which is received in a dental surgery or an Accident and Emergency department of a hospital by a Dental Practitioner or Medical Practitioner within two years of the Bodily Injury. Dental expenses incurred within two years of the date of Bodily Injury for treatment which either takes place or is expected to take place after the expiry of the two years from the date of Bodily Injury are not Dental Expenses for the purpose of this insurance.
5. Dental Practitioner shall mean any suitably qualified dental practitioner registered under the Irish Dental Council in the Republic of Ireland other than:
 - (a) an Insured
 - (b) a member of the immediate family of an Insured or
 - (c) an employee of an Insured.
6. Face shall mean the front of the human head from the forehead to the chin and ear to ear.
7. Facial Scarring shall mean any scarring of the Face.
8. Fracture shall mean a break in the full thickness of a bone.
9. Gainful Employment shall mean that the Insured must be working under a contract of employment or as self-employed where their earnings are taxed under PAYE or Schedule D of the Taxes Consolidation Act (TCA) for assessment purposes.
10. Hospital shall mean an institution which meets all of the following requirements:
 - (a) holds a licence as a hospital (where licensing is required);
 - (b) operates primarily for the reception, care and treatment of sick and injured persons as in-patients;
 - (c) provides 24hrs a day nursing services by registered or graduate nurses;
 - (d) has a staff of one or more licensed physicians available at all times
 - (e) provides organised facilities for diagnosis and major surgical facilities; and
 - (f) is not primarily a clinic, nursing, rest or convalescent home, a rehabilitation centre, an extended care facility or similar establishment and is not, other than incidentally, a place for alcoholics or drug addicts.
11. Hospitalisation shall mean an overnight stay in a hospital, as an in-patient, such confinement being certified by a Medical Practitioner.
12. Income shall mean weekly gross income, excluding commission, bonuses, overtime payments and any allowances earned through personal exertion, averaged over the period of twelve (12) months immediately preceding the commencement of the disability.
13. Loss of Hearing shall mean total and permanent loss of hearing.
14. Loss of Limb shall mean:

In the case of a leg:

 - (a) loss by permanent physical severance at or above the ankle; or
 - (b) permanent and total loss of use of a complete foot or leg.

In the case of an arm:

 - (a) loss by permanent physical severance of the four fingers at or above the metacarpophalangeal joints (where the fingers join the palm of the hand); or
 - (b) permanent and total loss of use of a complete arm or hand.

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15. Loss of Sight shall mean permanent and total loss of sight:
 - (a) in both eyes if the Insured's name is added to the register of Blind Persons on the authority of a fully qualified ophthalmic specialist; or
 - (b) in one eye if the degree of sight remaining after correction is 3/60 or less on the Snellen Scale (seeing at 3 feet what the Insured should see at 60 feet).
16. Medical Consultant shall mean a Medical Practitioner who has a current full registration with the Irish Medical Council and who holds a public consultant post; or has held a public consultant post in the past and now practices within the same specialised field; or holds the necessary qualifications for a public consultant post together with evidence of appropriate general professional and higher specialist training to a standard required for such a post in the speciality in which he/she intends to work.
17. Medical Expenses shall mean expenses, not recoverable from any other source, necessarily and properly incurred by the Insured within two years of the date of Bodily Injury for medical, Hospital, surgical, x-ray or nursing treatment, including the cost of medical supplies and ambulance hire. Medical expenses incurred within two years of the date of Bodily Injury for treatment which either takes place or is expected to take place after the expiry of the two years from the date of Bodily Injury are not Medical Expenses for the purpose of this insurance.
18. Medical Practitioner shall mean any suitably qualified medical practitioner other than:
 - (a) an Insured
 - (b) a member of the immediate family of an Insured
 - (c) an employee of an Insured.
19. Osteoporosis shall mean the thinning of the bone out of proportion to age.
20. Permanent Total Disablement shall mean disablement which totally prevents the Insured from working in or attending to any and every occupation and which will in all probability continue for the remainder of the Insured's natural life.
21. Temporary Total Disablement shall mean disablement which totally prevents the Insured from carrying out all parts of the Insured's usual Gainful Employment.

Exclusions applicable to Section 3

1. The Insurer will not pay for any claim which is the result of or caused by:
 - (a) intentional self-injury, or
 - (b) suicide or attempted suicide, or
 - (c) flying as a pilot.
2. The Insurer will not pay any benefit which is the result of or is contributed to by:
 - (a) sickness or disease (not resulting from Bodily Injury), or
 - (b) any naturally occurring condition or degenerative process, or
 - (c) any gradually operating cause.
3. The Insurer will not pay the first €32 of each and every loss under Item 6 or 7.

4. The Insurer will not pay any benefit for an Insured where the Insured is under the influence of or being affected by alcohol or drugs other than drugs taken under the direction of a qualified Medical Practitioner.
5. The Insurer will not pay any benefit under Item 11 for any Fracture resulting from Osteoporosis where this condition has been diagnosed and made known to the Insured prior to the Fracture.
6. The Insurer will not pay Dental Expenses for any costs in providing repairs to dentures or artificial teeth or any dental work involving the use of precious metals.
7. Claims under Items 5, 8 and 9 incurred more than 24 months after the date of Bodily Injury.

Conditions applicable to Section 3

The following Conditions apply to this Section in addition to the Conditions that apply to the entire Policy. The titles of these paragraphs are for convenience only and do not lend any meaning to this contract.

1. **Assignment**
The Insurer will not accept or be affected by any notice of any trust, charge, lien, assignment, or other dealing with, or relating to, this Section.
2. **Claim Evidence**
The Insured must provide, at the Insured's own expense, any evidence the Insurer asks for to support the Insured's claim. The Insured must undergo as many medical examinations in connection with any claim as the Insurer may require at the Insured's own expense.
3. **Claim Payment**
If the Insurer has paid a claim under this Section, and the payment has been accepted, the Insurer will not make any further payments for the same claim. Benefit will be paid to the Insured or to the Insured's personal representative, whose receipt will discharge the Insurer. In the event that the Insured is under 18 years of age the benefit will be paid to the Insured's parents.
4. **Claim Payment Interest**
The Insurer will not pay interest on any claim payment.
5. **Claim Reporting**
The Insured must tell the Insurer about any potential claim as soon as possible.

Extensions applicable to Section 3

If an Insured sustains any accidental Bodily Injury or illness which is diagnosed during the Period of Insurance, regardless of the Operative Time or the exclusions applicable to this Section, access to a Medical Second Opinion service is provided by the Insurer.

Using Medical Second Opinion

Full details are available by referring to the Insurer but the following is a summary:

1. An Insured should contact Second Opinion by telephoning +44 207 486 2300 and provide details of their current Medical Consultant.
2. An Insured should then request that their Medical Consultant forwards their medical file to Second Opinion (this may require written authorisation).
3. In most cases it will not be necessary for an Insured to visit Second Opinion. However, if Second Opinion

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considers this necessary, the Insurer will pay for the cost of the first consultation (excluding the cost of travel and accommodation).

Policy Exclusions

This Policy does not cover:

- (a) loss or destruction of or damage to any property whatsoever or any loss or expense whatsoever resulting or arising therefrom or any consequential loss; or
- (b) any legal liability of whatsoever nature; or
- (c) any claim which is the result of Bodily Injury (as defined in Section 2 and Section 3), death, Loss of Limb, Loss of Sight, Loss of Hearing, Permanent Total Disablement, Temporary Total Disablement, Fractures, Facial Scarring, Hospitalisation, Coma or the incurring of Medical Expenses or Dental Expenses

directly or indirectly caused by, contributed to by, arising from, occasioned by, or happening through or in consequence of

1. ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel;
2. the radioactive, toxic, explosive, or other hazardous properties of any explosive nuclear assembly or nuclear component thereof;
3. war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power, or any warlike activities including use of military force by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends;
4. nationalisation, confiscation, requisition, seizure or destruction by the government or any public authority.

Policy Conditions

The following Conditions apply to the entire Policy. Additional Conditions specific to each Section are set out therein. The titles of these paragraphs are for convenience only and do not lend any meaning to this contract.

1. **Arbitration**
All differences arising out of this Policy shall be referred to the decision of an arbitrator to be appointed in writing by the parties in difference or if they cannot agree upon a single arbitrator to the decision of two arbitrators, one to be appointed in writing by each of the parties within one calendar month after having been required in writing so to do by either of the parties or, in case the arbitrators do not agree to the decision, of an umpire appointed in writing by the arbitrators before entering upon the reference. The umpire shall sit with the arbitrators and preside at their meetings and the making of an award shall be a condition precedent to any right of action against the Insurer. After the expiration of one year after any destruction or damage the Insurer shall not be liable in respect of any claim thereof unless

such claim shall in the meantime have been referred to arbitration.

2. **Due Diligence**
The due observance and fulfilment of the terms and conditions of this Policy by the Insured insofar as they relate to anything to be done or complied with by the Insured shall be a condition precedent to any liability of the Insurer to make any payment under this Policy.
3. **Fraud**
If any claim be in any respect fraudulent or if any fraudulent means or devices be used by the Insured or anyone acting on the Insured's behalf to obtain any benefit under this Policy or if any Damage be occasioned by the wilful act or with the connivance of the Insured all benefit under this Policy shall be forfeited.
4. **Governing Law**
This Policy shall be governed by and construed in accordance with the laws of the Republic of Ireland.
5. **Identification**
This Policy and the Schedule (which forms an integral part of the Policy) and any endorsements added to the Policy shall be read together as one contract and words and expressions to which specific meanings have been attached in any part of this Policy or of the Schedule shall bear such specific meanings wherever they may appear unless a more specific meaning is stated as attaching solely to a particular part of the Policy.
6. **Insurance Act, 1936**
All moneys which become or may become due and payable by the Insurer under this Policy shall in accordance with Section 93 of the Insurance Act, 1936, be payable and paid in Ireland.
7. **Loss Payments**
In the event of any claim or claims being or becoming payable under more than one Section of this Policy in respect of any loss, destruction or damage to property of the Insured, the liability of the Insurer shall not exceed the amount stated as the Limit of Indemnity under Section 2 or the total amount which would have been or become payable under the appropriate item in Section 1 of this Policy, whichever is the greater.
8. **Policy Voidable**
This Policy shall be voidable in the event of misrepresentation, misdescription or non-disclosure in any material particular or fact.
9. **Reasonable Precautions**
The Insured shall take all reasonable precautions to prevent accidents and Damage.
10. **Right of Refusal**
The Insurer reserves the right to refuse to accept any member of a golf club who is proposed for insurance with the Insurer by that club and/or its brokers and/or agents. The Insurer shall not be obliged to provide any reasons whatsoever as to the grounds for its refusal to accept the said member as an Insured pursuant to this Policy.
11. **Subrogation**
Any claimant under this Policy shall at the request and at the expense of the Insurer do and concur in doing and permit to be done all such acts and things as may be necessary or reasonably required by the Insurer for the purpose of enforcing any rights and remedies or of obtaining relief or indemnity from other parties to which the Insurer shall be or would become entitled or

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subrogated upon its paying for or making good any loss under this Policy, whether such acts and things shall be or become necessary or required before or after his indemnification by the Insurer.

Claims Contact Details

Section 1

Chartis Ireland Golfsure,
Thornton & Partners,
Block 5,
Monread Commercial Centre,
Naas,
Co. Kildare.
Phone: (045) 907 032
Fax: (045) 895 568
E-mail: chartisgolfsure@thornpart.ie

Sections 2 & 3

Claims Department,
Chartis Insurance Ireland Limited,
Chartis House,
Merrion Road,
Dublin 4.
Phone: (01) 208 1400
Fax: (01) 283 7773
E-mail: claims.ie@chartisinsurance.com

Complaints Procedure

Chartis Insurance Ireland Limited wants to give you the best possible service. If you feel you have cause for complaint, you should contact the Property Manager at Chartis Insurance Ireland Limited.

If after such contact you remain dissatisfied, you may also write to the Customer Complaints Officer at Chartis Insurance Ireland Limited, Chartis House, Merrion Road, Dublin 4. Phone 01 208 1400.

If the complaint is not resolved to your satisfaction, you should contact the Managing Director, Chartis Insurance Ireland Limited, Chartis House, Merrion Road, Dublin 4.

At any stage, you may contact any of the following:

The Irish Insurance Federation,
39 Molesworth Street, Dublin 2.
Phone: 01 676 1820.
Fax: 01 676 1943.

The Financial Regulator,
P.O. Box 9138, College Green, Dublin 2.
Phone: 01 410 4000.
Fax: 01 410 4900.

The Financial Services Ombudsman's Bureau,
3rd Floor, Lincoln House,
Lincoln Place, Dublin 2.
Lo Call: 1890 88 20 90.
Phone: 01 662 0899.
Fax: 01 662 0890.

Managed by



Willis Risk Services (Ireland) Limited (t/a Willis)
is regulated by the Financial Regulator.

Endorsed by

