Optional insurance resource guide

2016-17

- Club crime insurance
- Club accident insurance
Financial stability is one of the most important considerations for any Kiwanis club. That’s why Kiwanis International provides general liability, directors and officers liability insurance to every club in the United States and Canada. However, Kiwanis has negotiated group pricing for additional coverage options—ensuring access to the level of protection your leadership desires.

In this brochure, you’ll find information for club accident insurance and crime insurance.* Each option is available separately. (Crime insurance is available in the U.S. only.) Your club is not required to purchase any of them. However, we strongly encourage you to consider each one and discuss them during upcoming board meetings.

The following pages provide details regarding benefits, premiums, deductibles and more—including examples of the possibilities that make each option worth considering.

After all, no club can guarantee that unforeseen events won’t happen. But you can help protect against their costs. Examine your options when it comes to issues such as theft, accidents and legal exposure. Explore this opportunity to maintain your club’s confidence and stability—and help keep its focus on service and fellowship.

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**Increase your club’s financial security**

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### What’s inside

- Club crime insurance
- Club crime insurance application form for U.S. clubs
- Club accident insurance
- Club accident insurance application form for clubs in the United States and Canada
- Club accident insurance—schedule of benefits
- For more information

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**Club crime insurance** *(for clubs in the U.S. only)*

**Why buy crime coverage?**

Your Kiwanis club may be exposed to theft that could financially impact its ability to provide needed community service. Information in this brochure can help protect your club in case of such a theft or crime.

These insurance policies are voluntary. Kiwanis International does not require them, but strongly encourages your club’s consideration. Please review the following information for an in-depth description of the coverage.

Your club could face theft of funds or member dishonesty and may be exposed to a wide variety of crime-related losses, including falsified receipts, theft of equipment, petty cash theft or phony invoicing. The premium for crime insurance is $125 for a $10,000 limit of liability, with a $250 deductible. Higher limits are are available if desired.

You are strongly encouraged to read and discuss these issues during your upcoming board meetings and determine whether your club needs the coverages.

**Crime claims examples**

The treasurer of a Kiwanis club had check-signing responsibility as well as access to its checking account. During his tenure, he set up a fictitious vendor who allegedly provided services for the club. The loss was not discovered until after he had left and was caught doing the same thing at his full-time employment. At this time, he admitted he had established the vendor “for the sole purpose of stealing from the organization.” As a result, the club found out he had stolen nearly $50,000.

Another Kiwanis club set up a consignment store to raise money and developed a no-questions-asked return policy in which merchandise could be returned without a receipt. The volunteer who ran the store took advantage of this policy by altering the books to show false returns and paying himself in cash. He made transactions in small amounts so as not to draw attention to the transactions. When the volunteer died unexpectedly, the fraud was discovered by the new bookkeeper. As a result, the club found out it had lost nearly $100,000 over the past four years.

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*Should questions arise, please contact Nathan Peterman, the Kiwanis International insurance broker at Hylant, +1-800-678-0361.*

**Crime coverage**

- Protects the club from theft of funds and dishonest volunteers, members, officers and employees
- Softens the cost to a club for theft or embezzlement and other crime-related losses
- Protects the integrity of Kiwanians

**Policy highlights of crime coverage**

- Broad occurrence coverage for employee/volunteer theft, premises, transit and depositors forgery
- Broad definition of theft
- Premises coverage includes computer theft, safe burglary and robbery
Club crime insurance

Application form for clubs in the United States
(Not available for clubs in Canada)

All clubs, regardless of previous participation in the Club Crime Insurance program, are required to complete this form. The form and payment must be submitted together to Hylant as outlined below.

I. General Information (please print)

Name of organization: ____________________________ Key number: __________________

Address: ______________________________________

City: __________________ State: __________ ZIP: __________

Submitted by: ____________________ Contact phone number: ( )

Email address: ____________________________________________ Nature of operations: Kiwanis Club

Do you have a foundation, Key Club, or Circle K Club? If yes, please provide the name of the foundation/s or club/s: ____________________________________________________________

II. Prior insurance and activities information

1. Has any insurer made any payments, taken notice of claim or potential claim or non-renewal of management liability or similar insurance? □ Yes □ No

   If yes, please provide details on a separate page.

2. Does the Applicant allow the employees who reconcile the monthly bank statements to also sign checks or handle deposits? □ Yes □ No

   If yes, please provide details on a separate page.

III. Other information

1. The undersigned declares that to the best of his/her knowledge the statements herein are true. Signing of this Application does not bind the undersigned to complete the insurance, but it is agreed that this Application shall be the basis of the contract should a Policy be issued, and this application will be attached to and become a part of such Policy. If issued, Insurer hereby is authorized to make any investigation and inquiry in connection with this Application, as they may deem necessary.

2. It is warranted that the particulars and statements contained in the Application for the proposed Policy and any materials submitted herewith (which shall be retained on files by Insurer and which shall be deemed attached hereto, as if physically attached hereto), are the basis for the proposed Policy and are to be considered as incorporated into and constituting a part of the proposed Policy.

3. It is agreed that in the event there is any material change in the answers to the questions contained herein prior to the effective date of the Policy, the applicant will notify Insurer and, at the sole discretion of Insurer, any outstanding quotations may be modified or withdrawn.

4. It is agreed that in the event there is any misstatement or untruth in the answers to the questions contained herein, Insurer shall have the right to exclude from coverage any claim based upon, arising out of, or in connection with such misstatement or untruth.

Signed: ____________________________ Date: ____________________________

(Must be signed by club president or secretary)

For purposes of creating a binding contract of insurance by this application or in determining the rights and obligations under such contract in any court of law, the parties acknowledge that a signature reproduced by either facsimile or photocopy shall have the same force and effect as an original signature and that the original and any such copies shall be deemed on the same document.

Coverage request (please select your coverage option)

□ Crime $10K, $250 Retention, $125 Premium
□ Crime $25K, $500 Retention, $155 Premium
□ Crime $50K, $500 Retention, $225 Premium*

* Higher limits available.

Full payment is required for coverage to be in place. Please submit completed application with check payable to:

Hylant/Kiwanis Team
301 Pennsylvania Parkway, Suite 201
Indianapolis, IN 46280 1-800-678-0361

www.KiwanisOne.org/liability
Club accident insurance

Why buy accident insurance?
As a Kiwanis officer, you know the importance of safety. But no matter how careful you are, accidents can happen. We are pleased to offer an optional accident insurance program that can cover guests, volunteers and members.

Your club can purchase accident coverage for club events where a member or volunteer may be injured:
• Affordable accident insurance for volunteers and members of the club
• An important benefit program that shows you care and makes your club more attractive

Who is eligible?
All volunteers and members of a Kiwanis club-sponsored event, provided the club has paid the appropriate premium.

Covered activities
All volunteers and members of the Kiwanis club are covered while participating in club-sponsored events, including but not limited to special events, fairs and fundraisers.

Enrollment
Any Kiwanis club may enroll. To apply, fill out the application and send it with your premium, as indicated. If you have any questions, contact Nathan Peterman, the Kiwanis International insurance broker at Hylant, +1-800-678-0361.

Benefits
1. Accidental death
If injury shall result in the death of the insured person within 365 days of the covered accident causing the injury directly and independently of all other causes, the company will pay the accidental death benefit maximum amount under the program you have selected.

2. Accidental dismemberment
If injury to an insured person shall result within 365 days after the date of the covered accident causing injury directly and independently of all other causes, in any one of the losses specified on the form, the company will then pay the benefit percentage of the maximum amount under the program selected.

Accident insurance claim examples

Injury: A Kiwanis club owns a portable refreshment trailer that it uses as a fundraiser by selling food items at local county fairs. A Kiwanis member sets up the trailer for an upcoming event and realizes it is not level. He’s the only one there, so he attempts to move it by himself by picking the trailer up by the tongue and pulling it. The trailer slips out of his hands, and the tongue strikes his foot, crushing it. The covered accident insurance may apply.

Injury: The Kiwanis club runs a weekly bingo game as a fundraiser, and the sponsored Key Club runs the concession stands. As one of the Key Clubbers is returning from the storage area carrying supplies, she trips over a wayward box (which she left there) and falls forward, hitting her head on the floor. The ambulance is called, and she is rushed to the hospital. She suffers a concussion and cracked cheekbone. Her family does not have health coverage. The covered accident insurance may apply.

Death: A club’s annual fundraiser, a turkey shoot tournament, is conducted every November. The weather during the shoot is generally cold but not yet in the freezing range. This year the temperatures are colder than normal, with several days below freezing before the tournament. All participants are required to sign a waiver for the event. During the tournament, a participant is accidentally shot and killed by a bullet ricocheting off of a pond of ice. Even though the participant signed a waiver, the covered accident insurance may apply.

Dismemberment: A Kiwanis club is making repairs to a local homeless shelter as a service project. A member is helping repair the external wood trim, using his own table saw to cut the trim into appropriately sized pieces. At one point during the afternoon, there’s a lot of commotion around the area where he is cutting the trim. He becomes distracted and accidentally cuts off his index finger. He is rushed to the emergency room, where efforts to reattach his finger fail. The covered accident insurance may apply.
Club information (please print)
Club name (and SLP club name, if applicable): ____________________________________________  Key number: __________________
Address: ________________________________________________________________________________
City: ___________________________  State/Province: ________________________________
ZIP/Postal code: __________________________________________________________________________
Submitted by: ____________________________________________________________________________
Contact phone number: _____________________________________________________________________
Fax: ( )  Email: __________________________________________________________________________

Previous insurance: If an accident insurance program has been in force, please provide a copy of program limits and claims experience for the last three years.
All policies will expire 10/31 of the policy year.

Choice of program
☐ Class 1 limit $10,000 Excess Medical/$3 pp annual
☐ Class 2 limit $25,000 Excess Medical/$4 pp annual

Premium calculation
(To cover an SLP club, include it in the count and identify the club above.)
Number of members: ____________  Premium per member:___________
Number of volunteers:* ____________  Premium per volunteer:___________
Total premium enclosed: __________
*As this number may fluctuate — use your best estimate.

Signed statement
I acknowledge that I have read, understand and agree to the terms and conditions of this coverage as detailed in this brochure and the
above is correct to the best of my knowledge. I understand that the company must approve this enrollment form before coverage is
effective and may audit my records to verify proper payment of premium.

Signed: ___________________________  Date: __________
(Must be signed by club president or secretary)

For purposes of creating a binding contract of insurance by this application or in determining the rights and obligations under such contract
in any court of law, the parties acknowledge that a signature reproduced by either facsimile or photocopy shall have the same force and
effect as an original signature and that the original and any such copies shall be deemed on the same document.

Mail this form and your check payable to:
Hylant/Kiwanis Team
301 Pennsylvania Parkway, Suite 201
Indianapolis, IN 46280  1-800-678-0361

Copies of all forms are available for download at:
www.KiwanisOne.org/liability
## Overview

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<thead>
<tr>
<th></th>
<th>Class 1</th>
<th>Class 2</th>
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<tbody>
<tr>
<td>Accidental Death and Dismemberment</td>
<td>US$10,000</td>
<td>US$25,000</td>
</tr>
<tr>
<td>Excess medical maximum</td>
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<td>US$25,000</td>
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<tr>
<td>Dental benefit</td>
<td>Included in accident limit</td>
<td>Included in accident limit</td>
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<tr>
<td>Aggregate limit per accident</td>
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<td>US$250,000</td>
</tr>
<tr>
<td>Deductible per injury</td>
<td>US$50</td>
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<tr>
<td>Benefit period</td>
<td>365 days</td>
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</tbody>
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### How does the policy work?

If a Kiwanis club member or volunteer is injured while participating in a Kiwanis club-sponsored event, this policy will respond as an excess medical policy. If the Kiwanis member or volunteer incurs medical bills, he or she must FIRST submit the bills to his or her primary healthcare provider. If there are bills or portions of bills remaining, or if the claimant has no primary healthcare provider, then the claimant should submit an accident form with the Explanation of Benefits (EOB) from the primary provider and/or the itemized bills. Claim forms will be supplied to participating clubs.

If the injured Kiwanis member does not have primary health insurance, then this policy will respond as primary.

### Limitations

**Aggregate limit**

If more than one insured person suffers a loss in the same accident, then the most that will be paid is the aggregate limit shown above. If an accident results in benefit amounts becoming payable, which when totaled exceed the applicable aggregate limit of insurance, then the aggregate will be divided proportionally among the insured persons.

### Exclusions

1. Owned aircraft, leased aircraft, or operated aircraft
2. Aircraft pilot or crew
3. Disease or illness
4. Illegal acts
5. Incarceration
6. Intoxication
7. Service in the armed forces
8. Suicide or intentional injury
9. War

### Annual Member Premium

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<tr>
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<th>US$3 / member / year*</th>
<th>US$4 / member / year*</th>
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### Annual Volunteer Premium

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<tr>
<th></th>
<th>US$3 / volunteer / year *</th>
<th>US$4 / volunteer / year *</th>
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</thead>
</table>
ADDITIONAL INFORMATION

Accidental Death and Dismemberment

The company will pay the applicable benefit amount if an accident results in a covered loss not otherwise excluded. The accident must result from an insured hazard and occur while an insured person is insured under this policy, while in force. The covered loss must occur within one year of the accident.

Accident Medical Expense

The company will reimburse up to the maximum benefit amount for Accident Medical Expense if accidental bodily injury causes an insured person to first incur medical expenses for care and treatment of the accidental bodily injury within 90 days after an accident.

Accident Medical Expense

The benefit amount is payable only for medical expenses incurred within 365 days after the date of the accident causing the accidental bodily injury.

Deductible

The deductible for Accident Medical Expense will be deducted from any benefit amount for Accident Medical Expense that the company will pay. The deductible applies separately to each insured person and each accident.

Please refer to the policy for any additional limitations or exclusions under this plan.

FOR MORE INFORMATION

Kiwanis International
Risk Management Department
1-800-549-2647, ext. 210 or ext. 112

Hylant
1-800-678-0361

Crime insurance (United States only)
Hylant
1-800-678-0361

Club accident insurance
Hylant
1-800-678-0361

For complete club information, visit the Kiwanis website:
www.KiwanisOne.org

Blank copies of all forms are available for download at:
www.KiwanisOne.org/liability
This affordable coverage may be the most important insurance you buy

Your Kiwanis club’s financial security is one of the most important responsibilities of club leaders. That’s why Kiwanis International offers coverage options beyond general liability and directors and officers liability insurance. Look inside to learn how to increase your club’s stability.

www.KiwanisOne.org