



QBE Insurance (Australia) Limited

School Fee Protect[®] Insurance

Insurance Product Disclosure Statement and Policy Wording



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Date of preparation: 11 October 2018

Date effective: 1 November 2018

QM7918-1118

About this booklet

There are two parts to this booklet. The first part is Important Information about this Policy including information about how we'll protect your privacy and how to make a complaint or access our dispute resolution service.

The second part is your Policy Wording which sets out the detailed terms, conditions and exclusions of the Policy.

Because we don't know your own personal circumstances, you should treat any advice in this booklet as purely general in nature. It doesn't consider your objectives, financial situation or needs. You should carefully consider the information provided with regard to your personal circumstances to decide if it's right for you.

This booklet is also a Product Disclosure Statement (PDS). Other documents you receive may comprise the PDS. You'll know when this happens because it'll say so in the document.

We may need to update information in this PDS. If we need to do this, we'll either send you a new PDS or a supplementary PDS. You can also get a copy of these simply by calling us.

The PDS is issued by QBE Insurance (Australia) Limited. QBE takes full responsibility for the contents of the whole PDS.

For more information or to make a claim

Please take the time to read through this booklet and if you have any questions, need more information or to confirm a transaction, please contact:

- QBE on 1300 105 043

Full details of what you must do for us to consider your claim are provided in the 'Claims' section at the end of this booklet. To make a claim under this Policy please contact:

- QBE on 1300 105 043

About QBE Australia

QBE Insurance (Australia) Limited ABN 78 003 191 035 AFSL 239545 is a member of the QBE Insurance Group Limited ABN 28 008 485 014 (ASX: QBE). QBE Insurance Group is Australia's largest international general insurance and reinsurance group, and one of the largest insurers and reinsurers in the world.

About School Fee Protect Insurance

School Fee Protect Insurance (SFPI) is a distributor of QBE. As a distributor they are only permitted to provide general factual information about the product. SFPI receives a commission from QBE for each product sold.

If you require further information about the policy, you should speak to your financial services advisor or contact QBE.

School Fee Protect is a registered trade mark of SFPI Ltd and used under licence.

Important Information

In this first part of the booklet we explain important information about this Policy including how we'll protect your privacy and how to make a complaint or access our dispute resolution service.

Duty of disclosure

Your duty of disclosure

Before you enter into an insurance contract, you have duty of disclosure under the *Insurance Contracts Act 1984*.

If we ask you questions that are relevant to our decision to insure you and on what terms, you must tell us anything that you know and that a reasonable person in the circumstances would include in answering the questions.

You have this duty until we agree to insure you.

If you do not tell us something

If you do not tell us anything you are required to tell us, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both.

If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed.

Eligibility criteria

For any of the covers provided by this Policy, you must:

- be aged between 18 - 59 years of age at the commencement date;
- be a permanent resident of Australia;
- be employed in permanent gainful employment when you apply for this insurance (you are working on a permanent and continuous basis for wages or income for a minimum of twenty (20) hours every week and you are not in employment of a seasonal nature, a casual nature or self employed); and
- you do not have any prior knowledge your permanent gainful employment is to be terminated or decreased.

Applying for cover

You may apply for this Policy at any time. Assuming that you meet all eligibility criteria, you will be issued with a Policy Schedule confirming your cover including the following information:

- your name and address;
- the amount of your school fees that are covered;
- premium including taxes and charges.

Privacy

We'll collect personal information when you deal with us, our agents, other companies in the QBE group or suppliers acting on our behalf. When we say personal information we may also mean sensitive information such as health information, criminal history or professional memberships that's relevant to us issuing, administering or managing products or providing services and the terms on which we will do these things. We use your personal information so we can do business with you, which includes issuing and administering our products and services and processing claims. Sometimes we might send your personal information overseas. The locations we send it to can vary but include the Philippines, India, Ireland, the UK, the US, China and countries within the European Union.

Our Privacy Policy describes in detail where and from whom we collect personal information, as well as where we store it and the full list of ways we could use it. To get a free copy of it please visit qbe.com.au/privacy or contact QBE Customer Care.

It's up to you to decide whether to give us your personal information, but without it we might not be able to do business with you, including not paying your claim.

Please see 'Contacting QBE Customer Care, AFCA or the OAIC' of this Product Disclosure Statement for information on how to contact the QBE Customer Care Unit.

Significant benefits and features

The following is a summary only and does not form part of the terms of your Policy. We give examples of some of the significant benefits and risks but you need to read the Policy Wording which set out the terms and conditions of this Policy to make sure it matches your expectations.

This Policy is designed to provide you with school fee protect cover for the insured events selected as shown on your Policy Schedule, that occur during the period of insurance.

Cover	Benefit	Main conditions
Disability cover	We will pay you for each month of disability the monthly benefit shown on your policy schedule.	Maximum of 12 months cover per disability. We will only pay one disability benefit under the policy at any one time.
Involuntary unemployment cover	We will pay to you for each month of involuntary unemployment the monthly benefit shown on your policy schedule.	<p>Maximum of six (6) months involuntary unemployment cover during any consecutive twelve (12) month period.</p> <p>If your child's school fees have been continuously insured under this policy since year 7, we will increase this benefit to:</p> <ul style="list-style-type: none"> • 7 months in year 8; • 8 months in year 9; • 9 months in year 10; and • 12 months in years 11 and 12

Significant risks

The Policy does not cover certain things

Claims may be refused in certain circumstances. Please refer to the Policy Wording for full details. These are certain events that are not covered by this insurance.

Summary of limits to the cover provided

Cover	Risk
All covers	<ul style="list-style-type: none"> • This Policy is limited to the period of insurance shown in your Policy Schedule. • There is no surrender value on the Policy. • You need to be aware that there are limits to each Policy benefit. The extent of these limits are set out in the Policy Wording. If you do not adequately insure yourself you may have to bear the uninsured portion of any loss yourself. If you are unsure whether you are insured for the correct amount, you should seek professional advice. • Cover is subject to exclusions detailed in the Policy Wording.
Disability cover	<ul style="list-style-type: none"> • Up to 12 monthly payments whilst you remain disabled. • There is no cover for disability occurring within thirty (30) days of the original inception date. • There is no cover for the first 14 consecutive days of disability.
Involuntary unemployment cover	<ul style="list-style-type: none"> • Benefit payable for maximum of six (6) months during any consecutive twelve (12) month period. If your child's school fees have been continuously insured under this policy since year 7, we will increase this benefit to: <ul style="list-style-type: none"> ○ 7 months in year 8; ○ 8 months in year 9; ○ 9 months in year 10; ○ 12 months in years 11 and 12. • There is no cover for involuntary unemployment occurring within thirty (30) days of the original inception date. • There is no cover for the first 14 consecutive days of involuntary unemployment.

What you are not covered for

There are certain times when this Policy may not provide cover. See the 'Events we will not cover' table for full details.

We may also refuse to pay or may reduce the amount we pay under a claim:

- if you do not comply with the Policy conditions (Please read the Policy Wording of this document for details of the conditions to make sure you understand your obligations);
- if you do not comply with your duty of disclosure (such as not telling us of a pre-existing illness); or
- if you make a fraudulent claim.

The cost of this Policy

Premium is what you pay us for this Policy and it's made up of the amount we've calculated for the risk and any taxes and government charges.

When calculating your premium we take a number of factors into account, including:

Factors	Impact
The annual school fee	premium increases as the school fee increases.
Details relating to any joint insured	each person listed on the Policy is priced according to the details provided by you, however, you do receive a discount for a joint policy.

Commission is paid to SFPI who sold you the Policy. It is not an additional charge to you and it is included in the premium.

Cooling-off information

If you change your mind within 21 days of buying your Policy, you can cancel it and receive a full refund. Naturally, this doesn't apply if you've made or are entitled to make a claim. Even after the cooling off period ends, you still have the right to cancel your Policy. However, we may deduct some costs from any refund, as set out in the Policy Wording under 'Cancelling your Policy'.

To cancel your policy within the cooling off period, send an email to QBE at SFPI@qbe.com.

The General Insurance Code of Practice

QBE Australia is a signatory to the General Insurance Code of Practice.

The Code aims to:

- Commit us to high standards of service
- Promote better, more informed relations between us and you
- Maintain and promote trust and confidence in the general insurance industry
- Provide fair and effective mechanisms for the resolution of complaints and disputes between us and you
- Promote continuous improvement of the general insurance industry through education and training.

Resolving complaints & disputes

At QBE we're committed to providing you with quality products and delivering the highest level of service.

We also do everything we can to safeguard your privacy and the confidentiality of your personal information.

Something not right?

We know sometimes there might be something you're not totally happy about, whether it be about our staff, representatives, products, services or how we've handled your personal information.

Step 1 – Talk to us

If there's something you'd like to talk to us about, or if you'd like to make a complaint, speak to one of our staff. When you make your complaint please provide as much information as possible. They're ready to help resolve your issue.

You can also contact our Customer Care Unit directly to make your complaint. Our aim is to resolve all complaints within 15 business days.

Step 2 – Escalate your complaint

If we haven't responded to your complaint within 15 days, or if you're not happy with how we've tried to resolve it, you can ask for your complaint to be escalated for an Internal Dispute Resolution (IDR) review by a Dispute Resolution Specialist.

The Dispute Resolution Specialist will provide QBE's final decision within 15 business days of your complaint being escalated, unless they've requested and you've agreed to give us more time.

Step 3 – Still not resolved?

If you're not happy with the final decision, or if we've taken more than 45 days to respond to you from the date you first made your complaint, you can contact the Australian Financial Complaints Authority (AFCA). AFCA is an ASIC approved external dispute resolution body.

AFCA resolves insurance disputes between consumers and insurers, at no cost to you. QBE is bound by AFCA decisions - but you're not. You can contact AFCA directly and they'll advise you if your dispute falls within their Rules.

Disputes not covered by the AFCA Rules

If your dispute doesn't fall within the AFCA Rules, and you're not satisfied with our decision then you may wish to seek independent legal advice.

Privacy complaints

If you're not satisfied with our final decision and it relates to your privacy or how we've handled your personal information, you can contact the Office of the Australian Information Commissioner (OAIC).

Contacting QBE's CCU, AFCA or the OAIC

How to contact QBE Customer Care

Phone	1300 650 503 (Monday to Friday from 9am to 5pm, Sydney time, except on public holidays). Calls from mobiles, public telephones or hotel rooms may attract additional charges.
Email	<ul style="list-style-type: none"> • complaints@qbe.com, to make a complaint. • privacy@qbe.com, to contact us about privacy or your personal information. • customercare@qbe.com, to give feedback or pay a compliment.
Post	Customer Care, GPO Box 219, Parramatta NSW 2124

How to contact AFCA

Phone	1800 931 678 (free call)
Email	info@afca.org.au
Online	www.afca.org.au
Post	Australian Financial Complaints Authority, GPO Box 3, Melbourne VIC 3001

How to contact the OAIC

Phone	1300 363 992 Calls from mobiles, public telephones or hotel rooms may attract additional charges.
Email	enquiries@oaic.gov.au
Online	www.oaic.gov.au

Financial claims scheme

Your Policy is a protected policy under the Financial Claims Scheme (FCS), which protects certain insureds and claimants in the event of an insurer becoming insolvent. In the unlikely event of QBE becoming insolvent you may be entitled to access the FCS, provided you meet the eligibility criteria.

More information may be obtained from the Australian Prudential Regulation Authority (APRA).

How to contact APRA

Phone	1300 558 849 Calls from mobiles, public telephones or hotel rooms may attract additional charges.
Online	www.fcs.gov.au

Policy Wording

Your Policy is underwritten by QBE Insurance (Australia) Limited ABN 78 003 191 035 AFSL 239545.

Our agreement

Your Policy is an agreement between you and us, made up of:

- This Policy Wording
- Your Policy Schedule, which sets out the cover you've chosen and any terms specific to you.

The cover under this Policy is provided during the period of insurance, once you've paid us your premium. There are also:

- Conditions and exclusions which apply to specific covers or sections;
- General exclusions, which apply to any claim you make under this Policy;
- General conditions, which set out your responsibilities under this Policy;
- Claims conditions, which set out our rights and your responsibilities when you make a claim; and
- Other terms, which set out how this Policy operates.

Excesses

You must pay any excesses which apply to your claim. The excesses which you have to pay are set out in this Policy Wording or on your Policy Schedule.

How much we'll pay

The most we'll pay for a claim is the sum insured which applies to the cover or section you're claiming under, less any excess.

Paying your premium

The ways you can pay your premium, and the frequency you can pay it, are described below:

- One annual payment by cash, cheque or annual payment by credit card.

Your premium and how you've chosen to pay it is set out on your Policy Schedule.

Annual premium

If you pay your premium annually, and it's not paid by the due date or if your payment is dishonoured, this Policy won't operate and there'll be no cover.

Adjustment of premium on renewal

If we agree to renew your Policy and you claim for an incident that happened during a previous period of insurance, you must tell us about it. You agree to pay us any additional premium increase we'd have required you to pay if you'd told us about the claim before your Policy was renewed.

This condition doesn't affect any other rights we have at law or under this Policy.

Words with special meanings

The words and terms used throughout this Policy have special meanings set out below.

Where other words and terms are only used in one section of the Policy, we'll describe their special meaning in that section.

Word or term	Meaning
Commencement date	The inception date of the period of insurance stated on the Policy Schedule you received from us in connection with this Policy.
Disability	An illness or injury of the body or mind, including mental illness, that has been certified by a medical practitioner, and which prevents you from performing or engaging in an occupation.
Drugs	Any illegal substance or non-prescribed drug which, when used, impairs the person's faculties, or a prescribed drug used contrary to medical or manufacturer's advice.
Electronic Devices	Any laptop, computer, tablet or other electronic device used by your child for school work.
Incident	An event, neither expected or intended from your standpoint, which results in a claim on this Policy.
Illness	Any disease or sickness affecting the body or mind. This includes Mental Illness.
Injury	A bodily injury that is caused solely and directly by external and visible means as a result of an accident and which does not result from an illness.
Insured	The person(s) named in the Policy Schedule as being covered by the Policy.
Involuntary unemployment	The loss of your permanent gainful employment as a direct result of involuntary dismissal or retrenchment by an employer.
Medical consultation	Any activity undertaken for the purpose of detection, treatment or management of a medical condition including but not limited to the application of prescribed drugs or therapy whether conventional or alternative.
Medical	A medical professional registered and certified by the National and/or

Word or term	Meaning
practitioner	State Health Board in Australia, who is licensed to provide treatment, medication/prescriptions and medical opinions and reports – for example, doctors, physiotherapists and dentists. In the case of a Mental Illness, ‘medical practitioner’ means a mental health professional registered and certified by the National and/or State Health Board in Australia who is licensed to provide treatment, medication/prescriptions and medical opinions and reports – for example, psychologists, general practitioners and psychiatrists. A medical practitioner does not include a person who is related to you or a member of your family or a business partner.
Mental health treatment plan	The evidence based assessment and medical treatment plan, referred to and required by Australian Medicare, which includes the patient's diagnosed mental illness, their mental illness medical history and their mental state and medical needs following diagnosis, as well as details of any medications prescribed, the patient's actions to be undertaken to treat their mental illness and details of any medical referrals for the diagnosed mental illness.
Mental Illness	Any sickness, disorder or condition recognised or provided for in the latest edition of the Diagnostic and Mental Illness Statistical Manual of Mental Disorders, where a clinical diagnosis has been made and mental health treatment plan has been prescribed by a medical practitioner.
Original inception date	The commencement date of the first policy issued to you by us in connection with your child's school fees as long as you, without any gap, continuously renew that policy with us.
Period of insurance	The period this Policy operates for as shown on your Policy Schedule. Means the period shown on the Policy Schedule unless ending earlier in accordance with section 'When the Policy ends'
Permanent gainful employment	you are working on a permanent and continuous basis for wages or income for a minimum of twenty (20) hours every week and you are not in an employment of a seasonal, casual or self employed basis.
Permanent resident of Australia	you are an Australian or New Zealand citizen or holder of an Australian permanent residency visa and not living outside of Australia for more than twelve (12) months at a time.
Policy	your insurance contract with us which consists of this PDS, the Policy Wording and the Policy Schedule.
Policy Schedule	the schedule of insurance, or any future renewal schedule, or

Word or term	Meaning
	endorsement schedule.
Pre-existing condition	<p>(a) a chronic or ongoing (whether chronic or otherwise) medical or dental condition, illness or disease of which you were aware or should reasonably have been aware, or which is medically documented or under investigation in the 12 months prior to the issue of the Certificate of Insurance; or</p> <p>(b) any physical, Mental Illness or medical condition (including pregnancy), defect, illness or disease of which you were aware or should reasonably have been aware, or for which treatment, medication, preventative medication, advice, preventative advice or investigation have been received or prescribed by a medical or dental adviser in the 60 days prior to the issue of the Certificate of Insurance.</p> <p>Note:</p> <ul style="list-style-type: none"> - where any condition, illness or disease is the subject of an investigation, that condition, illness or disease falls within this definition, regardless of whether or not a diagnosis of the condition, illness, or disease has been made. - this definition applies regardless of whether or not the condition, illness or disease displays symptoms.
Premium	What you pay us to insure you. It's the cost of this Policy.
School fee	Is the annual amount payable to your child's school for tuition and boarding fees (if applicable). This does not include any costs associated with co-curricular activities, extracurricular activities, text books, stationery, uniforms, excursions, electronic devices or voluntary contributions.
Sum insured	The amount that you have insured your child's school fees for as shown on the Policy Schedule. We will pay no more than this amount.
Usual occupation	The main occupation you are engaged in that is suitable to your experience, training and/or education for which you receive a financial reward.
We, our, us	QBE Insurance (Australia) Limited ABN 78 003 191 035 AFSL 239545.
You, your	The person(s) named in your Policy Schedule as the insured.
Your child	The child named in your Policy Schedule.

Types of cover

Section 1. Disability cover

Section 2. Involuntary unemployment cover

Section 1: Disability cover

This cover applies in the event that you are unable to perform your usual occupation for up to twelve (12) months due to an illness or injury that arises during your period of insurance, provided it is not a pre-existing illness or injury, and has been certified by a medical practitioner.

There is no cover for disability occurring within thirty (30) days from the original inception date. There is no cover for the first fourteen (14) consecutive days of disability.

Benefit payable

We will only pay a benefit under this cover for an incident that occurs during the period of insurance.

We will make payments to you every three months in advance. Each payment will comprise of three months benefit payments. If your disability ends before the three month period, we will not seek reimbursement of any payment we have already made to you.

The maximum amount that we will pay under this benefit is the annual school fee amount shown on your policy schedule.

No benefit will be paid if you cannot provide us with evidence from a medical practitioner for the illness or injury you have sustained and that you are following the advice of the medical practitioner for your rehabilitation.

Joint cover

If you have 'joint cover' the maximum that we will pay is the amount stated under 'Benefit payable' for disability cover, regardless of whether one or both of you claim at the same time.

Recurrent disability

If you return to permanent employment for less than 6 months following a period of disablement, any further claim for the same disablement will be considered as a continuation of the prior period(s) of disablement.

Section 2: Involuntary unemployment cover

This cover applies in the event that you lose your permanent gainful employment as a direct result of your involuntary dismissal or retrenchment.

If you have made a claim for involuntary unemployment, you must resume permanent gainful employment for at least another thirty (30) consecutive days before another claim can be made.

There is no cover for involuntary unemployment occurring within thirty (30) days from the original inception date. There is no cover for the first fourteen (14) consecutive days of involuntary unemployment.

Benefit payable

We will only pay a benefit under this cover for an incident that occurs during the period of insurance.

We will make payments to you every three months in advance. Each payment will comprise of three months benefit payments. If your involuntary unemployment ends before the three month period we will not seek reimbursement for any payment we have already made to you.

We will only pay up to a maximum of six (6) months involuntary unemployment cover during any consecutive twelve (12) month period. If your child has been continuously insured since year 7, we will increase this benefit to:

- 7 months in year 8;
- 8 months in year 9;
- 9 months in year 10; and
- 12 months in years 11 and 12

For a benefit to be paid, you must:

- be already registered as unemployed with Centrelink or a licenced Recruitment Agency, or the Department of Social Services, or such other department as may be required by the government, or you can demonstrate that you are actively seeking employment;
- be able to provide evidence of your involuntary dismissal or retrenchment; and
- be actively seeking employment.

Joint cover

If you have 'Joint cover' the maximum that we will pay is the amount stated under 'Benefit payable for involuntary unemployment cover', regardless of whether one or both of you claim at the same time.

General exclusions

Events that we will not cover are listed in the table below and are marked by a 'x'.

Event or circumstance	Disability	Involuntary unemployment
A pre-existing medical condition.	x	
Disability occurring within thirty (30) days of the original inception date.	x	
The first fourteen (14) consecutive days of disability.	x	
Involuntary unemployment occurring within thirty (30) days of the original inception date.		x
The first fourteen (14) consecutive days of involuntary unemployment.		x
Failure to seek medical attention and/or treatment and/or failure to follow medical advice.	x	
Unreasonable refusal to attend an independent examination by a medical practitioner requested and paid for by us.	x	
Normal cessation of a contract, apprenticeship or seasonal employment.		x
You were not engaged in paid employment on a regular basis for a period of at least twenty (20) hours per week or if you were self-employed immediately before or on the date of commencement of the period of insurance.		x
You were not engaged in paid employment on a regular basis for a period of at least twenty (20) hours per week for at least sixty (60) consecutive working days immediately before becoming involuntarily unemployed, or if you were self-employed.		x
You became involuntarily unemployed and before you entered into your Policy you knew, or a reasonable person ought to have known, of any actual or proposed termination of employment or a decrease in work available to you.		x
Your unemployment is voluntary.		x

Event or circumstance	Disability	Involuntary unemployment
Disability and involuntary unemployment claim simultaneously.		x
An intentionally self-inflicted illness or injury.	x	x
Engaging in a criminal act.	x	x
Engaging in professional racing of any kind except foot racing.	x	x
Flying or taking part in aerial activity except as a fare paying passenger in a motor propelled aircraft owned and / or operated by a recognised airline or licensed charter company.	x	x
If the policy does not remain in force during the whole period of the disability	x	
If you return to employment in any occupation for reward or profit		x
If your disability is a result of your decision to cease work that is not supported by an independent medical assessment of your disability. (The mere fact that you are medically discharged from your usual occupation does not qualify as such an assessment).	x	
If you are an apprentice and your period of apprenticeship ends		x
If you are dismissed for any form of wilful or other misconduct which resulted in your immediate dismissal		x

Sanctions clause

You're not insured under any section of this Policy where a claim payment breaches any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of Australia, the European Union, United Kingdom or United States of America, or any local autonomous sanctions.

General conditions

There are conditions set out in this General conditions section, in the Claims section and under each particular cover and section. If any of these conditions aren't met, we may refuse a claim, reduce the amount we pay or in some circumstances we may cancel your Policy. When making a claim, you must have met and then continue to comply with the conditions of your Policy. Any person covered by your Policy, or claiming under it, must also comply with these conditions.

If you, or someone covered under your Policy, don't meet these conditions or make a fraudulent claim we may:

- Refuse to pay your claim or reduce what we pay for your claim
- Cancel your Policy.

Changes to your circumstances

You must tell us as soon as possible if circumstances occur, or if changes or alterations are intended or made which increase the risk of loss, damage or injury.

Examples include:

- Your occupation changing.

Claims

This section describes what you must do, as well as conditions that apply when you make a claim and at the time loss or damage occurs which is likely to give rise to a claim.

What you must do

You must advise us as soon as possible of an incident which could lead to a claim on this Policy.

When you make a claim you must:

- contact us by phone as soon as practicable and be ready to provide details of the incident;
- return the completed claim form, that we provide you, promptly together with all letters, documents, medical certificates or other documentation and evidence that you have been asked to provide, otherwise we cannot process your claim;
- attend an independent examination by a medical practitioner if requested and paid for by us;
- provide written statements under oath if we require it;
- be interviewed about the circumstances of the claim, if we require this.

To notify us about a claim, to obtain a claim form or if you require assistance, you can call us on 1300 105 043.

You must assist us

Before we will pay anything under this Policy, you must have complied with all the requirements of this section and provided us with all information and assistance that we have requested.

What you must not do

False or misleading information

We may deny part or all of your claim if you are not truthful and frank in any statement you make in connection with a claim, or if the claim is fraudulent or false in any respect.

What can affect a claim

We may refuse to pay a claim if you are in breach of your duty of disclosure or any of the conditions of this Policy, including any endorsements noted on or attached to the Policy Schedule.

We may be entitled to refuse to pay or to reduce the amount of a claim if:

- it is in any way fraudulent; or
- any fraudulent means or devices are used by you or anyone acting on your behalf to obtain any benefits under this policy.

GST

If you're a business you must tell us if you're registered, or are required to be registered, for GST. When you do this, we need you to give us:

- Your ABN
- The percentage of any input tax credit you will claim, or will be entitled to claim, on your premium.

When we pay a claim, your GST status will determine the amount we pay you. Your claim settlement amount will be adjusted to allow for any ITC entitlement.

Unless we say otherwise, all amounts in your Policy are inclusive of GST. There may be other taxation implications affecting you, depending upon your own circumstances. We recommend you seek professional advice.

How claim administration and legal proceedings are undertaken

We will take full control of the administration, conduct or settlement of the claim.

Providing proof

You must be able to prove to us you've suffered a loss covered by your Policy before we'll pay you for it. We may ask you for this proof if you make a claim under your Policy. So your claim can be assessed quickly, make sure you keep the following:

- Medical reports
- Proof of income
- Invoice for school fees
- Other documentation specific to your type of claim (e.g. proof of termination if your claim is due to your unemployment).

Other terms

These other terms apply to how your Policy operates.

Canceling your Policy

You can cancel your Policy at any time by telling us. If there are other people named as insured on your Policy, we only need a request to cancel it from one of you.

We may cancel your Policy in any of the circumstances permitted by law (eg failure to pay the premium by the due date) by informing you in writing.

We'll give you notice in person or send it to your address (including an electronic address) last known to us.

If you've paid your premium in advance, we'll refund you the proportion of the premium for the remaining period of insurance, less any administration fees.

Changing your Policy

Changes to this Policy only become effective when we agree to them and send you a new Policy Schedule detailing the change.

Joint and co-insureds

If more than one person is insured under your Policy, we'll treat a statement, act, omission, claim, request or direction by that person as having been made by all insured.

We only need a request from one person insured to cancel or change your Policy.

Notices

Any notice we give you will be in writing, and will be effective once it's delivered to you personally or to your last known address (including when it's an electronic one).

It's important for you to tell us of any change of address as soon as possible.

When the Policy ends

The Policy ends, and we stop paying benefits on the earliest of any of the following:

- the date your child ceases attending the school for which you are paying school fees;
- the date we receive a written request from you to terminate the insurance;
- the date given when we provide you with written notice to terminate the insurance in accordance with relevant legislation;
- the date you are no longer a permanent resident of Australia (unless otherwise agreed in writing by us);
- the date of your death.

Your policy will end on the expiry date shown on your policy schedule. However, if you still have an active claim we will continue to pay your benefits until the claim ends.

