

# CLUB CRIME INSURANCE CLUB ACCIDENT INSURANCE



TIME-SENSITIVE INFORMATION ENCLOSED. DON'T DELAY.

# INCREASE YOUR CLUB'S FINANCIAL SECURITY

Financial stability is one of the most important considerations for any Kiwanis club. That's why Kiwanis International provides general liability and directors and officers liability insurance to every club in the United States and Canada. However, Kiwanis has access to additional coverage options—ensuring a level of insurance 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 either 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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## CLUB CRIME INSURANCE *(for clubs in the U.S. only)* Application must be received by **October 31, 2019.**

### 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, petty cash theft or phony invoicing. The premium for crime insurance is \$145 for a \$10,000 limit of liability, with a \$250 deductible. Higher limits 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.

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

### CRIME COVERAGE

- Helps protect 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
- Helps protect 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

## 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 to avoid drawing 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 previous four years.

# CLUB CRIME INSURANCE

## Application form for clubs in the United States

(Not available for clubs in Canada)

Clubs that participated in the 2018–19 Club Crime Insurance program must complete this application again and submit it with premium payment to be eligible for coverage in 2019–20. 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: \_\_\_\_\_ (Please make sure email address is legible.)

Nature of operations: **Kiwanis Club**

Do you have a foundation or sponsor either a 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 individuals who reconcile the monthly bank statements to also sign checks or handle deposits?

Yes  No

If yes, do you have oversight after the reconciliation?

Yes (Please describe, attach sheet if necessary)

\_\_\_\_\_

No (We will review, but pricing would be outside of previously agreed-upon program pricing)

### 3. Required information

a. Number of employees/volunteers: \_\_\_\_\_

b. Revenue: \_\_\_\_\_

c. Number of locations: \_\_\_\_\_

### 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)

Application must be received by October 31, 2019. 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—now includes Social Engineering Fraud coverage!\*)

- Crime \$10K, \$250 Deductible, \$145 Premium
- Crime \$25K, \$500 Deductible, \$175 Premium
- Crime \$50K, \$500 Deductible, \$245 Premium\*\*

\*Social engineering fraud is a broad term that refers to the scams used by criminals to trick, deceive and manipulate their victims into giving out confidential information and funds. Criminals exploit a person's trust to find out their banking details, passwords or other personal data.

\*\* Higher limits available.

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

**Hylant/Kiwanis Team**  
**10401 N. Meridian, Suite 200**  
**Indianapolis, IN 46290 1-800-678-0361**

## CLUB ACCIDENT INSURANCE Application must be received by **October 31, 2019.**



### 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 members and volunteers involved in 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 has a concussion and a 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.

# KIWANIS CLUB ACCIDENT INSURANCE

Application form for clubs in the United States and Canada  

## 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 previously issued coverage will expire 10/31/19 and needs to be renewed via this application.

## 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**  
**10401 N. Meridian, Suite 200**  
**Indianapolis, IN 46290 1-800-678-0361**

Copies of all forms are available  
for download at:  
**kiwanis.org/liability**

## CLUB ACCIDENT INSURANCE–SCHEDULE OF BENEFITS

OVERVIEW	CLASS 1	CLASS 2
<b>Accidental Death and Dismemberment</b>	US\$10,000	US\$25,000
<b>Excess medical maximum</b>	US\$10,000	US\$25,000
<b>Dental benefit</b>	Included in accident limit	
<b>Aggregate limit per accident</b>	US\$250,000	US\$250,000
<b>Deductible per injury</b>	US\$50	
<b>Benefit period</b>	365 days	
<b>How does the policy work?</b>	<p>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.</p> <p>If the injured Kiwanis member does not have primary health insurance, then this policy will respond as primary.</p>	
LIMITATIONS		
<b>Aggregate limit</b>	<p>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.</p>	
<b>Exclusions</b>	<ol style="list-style-type: none"> <li>1. Owned aircraft, leased aircraft, or operated aircraft</li> <li>2. Aircraft pilot or crew</li> <li>3. Disease or illness</li> <li>4. Illegal acts</li> <li>5. Incarceration</li> <li>6. Intoxication</li> <li>7. Service in the armed forces</li> <li>8. Suicide or intentional injury</li> <li>9. War</li> </ol>	
<b>ANNUAL MEMBER PREMIUM</b>	<b>US\$3 / member / year</b>	<b>US\$4 / member / year</b>
<b>ANNUAL VOLUNTEER PREMIUM</b>	<b>US\$3 / volunteer / year</b>	<b>US\$4 / volunteer / year</b>

## 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:

**[kiwanis.org](http://kiwanis.org)**

Blank copies of all forms  
are available for download at:

**[kiwanis.org/liability](http://kiwanis.org/liability)**



# Kiwanis®

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**IMPORTANT  
CLUB INSURANCE  
INFORMATION  
DO NOT DISCARD**



**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.

**[kiwanis.org](http://kiwanis.org)**