

# HolidayPlay Proposal Form

Please complete and return this form together with your payment to: Morton Michel, Alhambra House, 9 St Michaels Road, Croydon CR9 3DD.  
Your insurance will be provided under a HolidayPlay Policy.

**Any special terms or conditions will be advised to you in writing.**

Please read the Summary and Guide carefully to help you select either HolidayPlay or HolidayPlay Plus.

Name of holiday play scheme

Your name

Address of holiday play scheme

Telephone

Fax

Email

Postcode

Your address (for correspondence purposes)

Telephone

Fax

Email

Postcode

Website [www.](#)

Have you been allocated an Employer Reference Number by PAYE of Her Majesty's Revenue & Customs?

Yes  No

If YES, please state the Employer Reference Number allocated to you:

## Information about your holiday play scheme:

1. You are automatically covered for all of the activities listed below as "agreed and approved"

### Agreed and Approved

Arts and crafts, badge making, basketball, bat and ball, board games, bouncy castles (**in accordance with policy conditions**), card games, clay modelling, climbing frames, computer games, construction kits, cooking, dance (**excludes break dancing**), dance mats, dolls, drama, dressing up, face painting, fancy dress, homework corner, horse riding (**in accordance with policy conditions**), imaginary play, karaoke, knitting, lego, mini golf, music, nature area, papier mache, parachute games, pedal go karts, play dough, playground games, races, reading corner, role play corner, roller skating (**excludes roller blading and skate boarding**), rounders, sand play, scooters, sewing, skipping, skittles, slides, snacks, space hoppers, swing ball, swings, table tennis, tennis, trampolines (**in accordance with policy conditions**), treasure hunts, watching television.

Do you offer only those activities listed above?

Yes  No

If No, please answer the following questions:

a) Do you offer formal coaching sessions in football, cricket or hockey?

Yes  No

If YES, are qualified instructors with their own public liability insurance supervising the sessions?

Yes  No

b) Do you offer gardening, junk modelling or woodwork activities?

Yes  No

If YES, please give full details of equipment and materials used:

c) Do you offer swimming, paddling pool or water play activities?

If YES,

Swimming - Public or private swimming pool?

Adult/child supervision ratio?

Yes  No

Is there a qualified life saver/swimming teacher or coach in attendance at all times?

Yes  No

Paddling - Depth of pool?

Adult/child supervision ratio?

Water Play - Type of water activity?

Depth of water?

Adult/child supervision ratio?

d) Do you offer cycling activities?

If YES,

Yes  No

(i) Where does the cycling take place?

(ii) Do the cycles belong to the club or the children?

e) Do you offer any other activity?

Yes  No

If YES, please give full details in the space below or on a separate sheet of paper.

**NB Any quotation/cover provided will be for those activities listed as "agreed and approved" plus any other declared activities agreed by Morton Michel.**

Please send samples of any promotional literature, flyers etc.

2 Will you be operating your holiday play scheme (please tick one box only):

a) for a maximum of 14 days in a 12 month period?

b) for a maximum of 6 weeks in a 12 month period?

c) for more than 6 weeks in a 12 month period?

If you have ticked a) or b), please specify dates cover is required:

If you have ticked c), cover will apply during any school holiday in a 12 month period commencing

(please state date cover is to commence)

3 Please give details of any relevant qualifications or experience that you, your staff or your volunteers have in relation to childcare:

4 Maximum number of children attending each play scheme session (please tick one box only):

Up to 50 children

Up to 100 children

Up to 150 children

More than 150 children

- please refer to Morton Michel

5 Do children under 8 years attend your play scheme?

Yes  No

If YES:

a) Region of OFSTED/name of other registering authority which has registered your holiday play scheme under the terms of the Childcare Act 2006:

b) Registration number:

c) If your group is not registered, please state reason(s):

d) Has registration ever been withheld or special conditions imposed?

Yes  No

If YES, please give details:

6 Do you comply with the following minimum adult:children supervision ratios at all times?

Yes  No

Age

Adult:Child Ratio

3 and over but under 8

1 : 8

8 and over

1 : 10

If NO, please give details:

7 Are all of the doors at your premises (internal and external) fitted with finger guards or finger shields?

Yes  No

8 Do you have a written Assessment of Risk?

Yes  No

9 a) Do you obtain satisfactory and confirmed references in writing of prospective employees' integrity before employing them?

Yes  No

b) Have you obtained the necessary Criminal Records Bureau Disclosures for all new and existing members of staff/voluntary helpers?

Yes  No

c) If at any time you have to wait for Criminal Records Bureau Disclosures on members of staff/voluntary helpers, are all non-checked personnel fully supervised at all times by a suitable person with Criminal Records Bureau clearance?

Yes  No

d) Have you or any group official been convicted of any criminal offences other than motoring offences or is any prosecution pending?

Yes  No

If you have ticked ANY of the shaded boxes, please give full details on a separate sheet of paper.

**Continued Overleaf**

# HolidayPlay Proposal Form Continued

- 10 Has any insurer ever:
- a) declined your proposal? Yes  No
- b) refused to renew or cancelled your policy? Yes  No
- c) imposed special terms or conditions for any childcare insurance you have previously taken out? Yes  No

If you have ticked ANY of the shaded boxes, please give full details on a separate sheet of paper.

- 11 Has the holiday play scheme suffered any loss or damage or had any claims made against them in the last 5 years? Yes  No   
If YES, please give full details (additional space overleaf):

Date	Type of claim	Amount settled or outstanding

**Failure to disclose previous claims could result in the invalidation of your policy.**

- 12 a) Do you have any existing insurances with Morton Michel? Yes  No   
If YES, please state policy number(s):

- b) Have you had any previous insurances with Morton Michel? Yes  No   
If YES, please state policy number(s):

## What cover do you require?

The basic HolidayPlay policy provides cover for:

- Public and Products Liability, Limit £3M
- Employers' Liability, Limit £10M (£5M if arising out of terrorism)
- Legal Expenses, Limit £100K
- Helplines

Do you require the Public and Products Liability limit to be increased to £5M? Yes  No

The HolidayPlay Plus policy provides cover for:

- Public and Products Liability, Limit £3M
- Employers' Liability, Limit £10M (£5M if arising out of terrorism)
- Legal Expenses, Limit £100K
- Helplines + Group Equipment
- Group Money

Do you wish to take out HolidayPlay Plus? Yes  No

If YES, you will automatically be insured for Group Equipment up to £2,000

Do you require a higher sum insured? Yes  No

If YES, we will send a Supplementary Questionnaire for you to complete.  
(Please do not send any payment with this form, we will provide a quotation on receipt of completed questionnaire.)

Premium Calculation	
Please refer to the premium chart before completing this section.	
Basic HolidayPlay Premium OR HolidayPlay Plus Premium	<input type="checkbox"/> £
Increased Public / Products Liability limit	<input type="checkbox"/> £
Optional Extension - Terrorism	<input type="checkbox"/> £
Total Premium	£
Morton Michel Administration Fee	£ 5.00
<b>Total to pay</b>	<b>£</b>

**Please make cheques payable to Morton Michel.**

Cover does not commence until the proposal has been accepted unless otherwise agreed.

## Declaration

Please read the declaration carefully and check the answers you have given before signing the proposal form.

I/We (or, in the case of a partnership or a limited company, any one of the partners or directors) hereby apply to Covea Insurance plc for HolidayPlay insurance and

- a) declare that to the best of my/our knowledge and belief the answers given are true and complete in every respect and all material particulars which may affect the assessment of the risk have been disclosed. If any written answer has been made by another person, such person shall for that purpose be deemed to be my/our agent and not the agent of Covea Insurance plc. To the extent that has been necessary, I/We have consulted relevant members of the organisation to verify answers stated in this form
- b) understand that Covea Insurance plc reserves the right to contact previous insurers to verify the information contained in this form
- c) agree that this proposal and declaration shall be the basis of the contract between me/us and Covea Insurance plc and shall be deemed incorporated into such contract
- d) declare that all appropriate enquiries have been made to ensure that no principal, director, partner, employee or voluntary helper is, or is obliged to be, listed on the Sex Offenders Register pursuant to the Sex Offenders Act 1997.

## Data Protection Act

I/We understand and agree that the personal information I/we provide (including sensitive personal details) may be used for insurance purposes by Covea Insurance plc, its connected companies, reinsurers, agents and subcontractors; and also shared with other insurance companies as required for the purposes of my/our insurance. Where we have provided information about my/our spouse(s), partner(s) or another person/other persons (including their sensitive personal details) I/we confirm that I/we have their permission to provide this information for insurance purposes. I/We understand that I am/we are entitled to a copy of my/our personal information on payment of a fee.

From time to time, Morton Michel may wish to send you details of services and products, if you do not wish to receive such mailings, please tick this box.

Signed: \_\_\_\_\_ Position: \_\_\_\_\_ Date: \_\_\_\_\_

**You have a duty to disclose all material facts and failure to do so could invalidate the insurance.**

**Cover does not commence until the proposal has been formally accepted by Morton Michel unless otherwise agreed with Morton Michel.**

**How would you like your documentation sent to you?**

We now aim to send all insurance documents in pdf format by email. This is quicker and kinder to the environment. It also means that you can keep a copy on your computer to print out whenever required. If you would prefer to have a copy of your policy schedule, Employers' Liability Certificate and policy booklet sent to you by post instead of email, please tick the box below. If you do not tick the box then your documents will be sent via email.

Please send my documents by post

**Where did you hear about Morton Michel? (Please tick as appropriate)**

Friend  Ofsted  Other (please state)

## Childcare Motor Insurance

Would you like Morton Michel to provide a quotation? Yes  No