Sporting Injuries Insurance Rule 1997

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Sporting Injuries Insurance Rule 1997



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Sporting Injuries Insurance Rule 1997



Part 1 Preliminary

1 Name of Rule

This Rule is the *Sporting Injuries Insurance Rule 1997*.

2 Commencement

This Rule commences on 5 September 1997.

3 Definitions

In this Rule:

member organisation means any organisation that belongs to, is a member or a constituent or subordinate organisation of, or is affiliated or connected with or attached to, a sporting organisation.

the Act means the Sporting Injuries Insurance Act 1978.

Part 2 Applications

4 Forms of application

For the purposes of section 21 (1) (a) of the Act, the prescribed form of application for a person applying for a benefit:

- (a) under section 19 (1) (a) of the Act is Form 1 in Schedule 1, or
- (b) under section 19 (1) (b) or 19 (1) (c) of the Act is Form S1 in Schedule 1, or
- (c) under section 19 (2) (a) of the Act is Form 2 in Schedule 1, or
- (d) under section 19 (2) (b) or 19 (2) (c) of the Act is Form S2 in Schedule 1.

5 Information in support of application

An application under section 19 of the Act must be accompanied by:

(a) in the case of an application under section 19 (1) (a):

- (i) a certificate or report relating to the injury that is the subject of the application given by a legally qualified medical practitioner concerning the examination of the applicant, the applicant's condition, the history of the injury as provided by the applicant and, if relevant, the degree of loss sustained by the applicant in the opinion of that practitioner, and
- (ii) a statement by the secretary or another official of the sporting organisation or member organisation to which the applicant belonged when the injury occurred outlining all details known to the secretary or the official of the occurrence that led to the injury, and confirming, from an examination of the organisation's records, that the applicant was registered as a participant with the organisation at the time of the injury, and
- (iii) a statement from at least one witness to the injury concerning the cause of the injury, or
- (b) in the case of an application under section 19 (1) (b):
 - (i) a certificate or report relating to the injury that is the subject of the application given by a legally qualified medical practitioner concerning the examination of the applicant, the applicant's condition, the history of the injury as provided by the applicant and, if relevant, the degree of loss sustained by the applicant in the opinion of that practitioner, and
 - (ii) a statement from the school principal or another official of the school at which the applicant was an enrolled student participant when the injury occurred outlining all details known to the principal or other official of the occurrence that led to the injury, and confirming that the applicant was participating in an authorised activity of the school at the time of the injury, and
 - (iii) a statement from at least one witness to the injury concerning the cause of the injury, or
- (c) in the case of an application under section 19 (1) (c):
 - (i) a certificate or report relating to the injury that is the subject of the application given by a legally qualified medical practitioner concerning the examination of the applicant, the applicant's condition, the history of the injury as provided by the applicant and, if relevant, the degree of loss sustained by the applicant in the opinion of that practitioner, and
 - (ii) a statement by an officer of the Department outlining all details known to the officer of the occurrence that led to the injury, and confirming that the applicant was an enrolled participant in an authorised activity of the Department at the time of the injury, and
 - (iii) a statement from at least one witness to the injury concerning the cause of injury,

or

- (d) in the case of an application under section 19 (2) (a):
 - (i) if a death certificate has been issued with respect to the death of the person concerned, a copy of that certificate, and
 - (ii) if a post mortem examination has been conducted with respect to the death, a copy of the report of the examination, and
 - (iii) a statement by the secretary or another official of the sporting organisation or member organisation to which the deceased belonged when the injury that resulted in the death occurred outlining all details known to the secretary or other official of the occurrence that led to the injury, and confirming, from an examination of the organisation's records, that the deceased was registered as a participant with the organisation at the time of the injury, and
 - (iv) a statement from at least one witness to the injury concerning the cause of the injury, or
- (e) in the case of an application under section 19 (2) (b):
 - (i) if a death certificate has been issued with respect to the death of the person concerned, a copy of that certificate, and
 - (ii) if a post mortem examination has been conducted with respect to the death, a copy of the report of the examination, and
 - (iii) a statement from the school principal or another official of the school at which the deceased was an enrolled student participant when the injury that resulted in the death occurred outlining all details known to the principal or other official of the occurrence that led to the injury, and confirming that the deceased was participating in an authorised activity of the school as an enrolled student participant at the time of the injury, and
 - (iv) a statement from at least one witness to the injury concerning the cause of the injury, or
- (f) in the case of an application under section 19 (2) (c):
 - (i) if a death certificate has been issued with respect to the death of the person concerned, a copy of that certificate, and
 - (ii) if a post mortem examination has been conducted with respect to the death, a copy of the report of the examination, and
 - (iii) a statement from an officer of the Department outlining all details known to the officer of the occurrence that led to the injury, and confirming that the deceased

was participating in an authorised activity of the Department as an enrolled participant at the time of the injury, and

(iv) a statement from at least one witness to the injury concerning the cause of the injury.

6 Lodging of applications

An application under section 19 of the Act is to be lodged at the office of the Executive Officer to the Sporting Injuries Committee situated at Level 5, 447 Kent Street, Sydney.

Part 3 Authorised activities and registered participants

7 Specification of authorised activities

The authorised activities of sporting organisations are:

- (a) any game or match involving 2 teams organised by a sporting organisation, a member organisation of the sporting organisation or any other organisation of which the sporting organisation is a member, and any training or practice for such game or match, that takes place within a period in respect of which a premium has been paid by the sporting organisation to the Committee under Part 4 of the Act, or
- (b) any sporting or athletic contest involving 2 or more participants that is organised by a sporting organisation, a member organisation of the sporting organisation or any other organisation of which the sporting organisation is a member, and any training or practice for such sporting or athletic contest, that takes place within a period in respect of which a premium has been paid by the sporting organisation to the Committee under Part 4 of the Act.

8 Persons to be treated as registered participants

- (1) In this clause, a reference to a sporting or athletic activity, in relation to a sporting organisation, is a reference to an activity in respect of which the organisation is, for the time being, declared under section 5 of the Act and includes a reference to an activity of a kind that is carried on in connection with or in relation to that activity.
- (2) A person is to be treated, for the purposes of the Act, as a registered participant of a sporting organisation with respect to a sporting or athletic activity at a particular time if:
 - (a) the person is registered, at that time and with respect to the activity, with the sporting organisation, or
 - (b) the person is registered, at that time and with respect to the activity, with a member organisation of the sporting organisation and the person's name:
 - (i) has been submitted to the Committee by, or with the concurrence of, the

sporting organisation, and

(ii) has been recorded by the Committee,

for the purpose of the person's being treated as a registered participant of the sporting organisation at that time and in respect of that activity.

9 Retrospective determinations by Committee

Despite clauses 7 and 8, the Committee may determine that:

- (a) an activity of a kind described by it is, for the purposes of the Act, to be deemed to be an authorised activity of a sporting organisation specified by the Committee for a period so specified, which period may have wholly or partly occurred before the date of the determination, or
- (b) a person who was not a registered participant of a sporting organisation at a time or during a period before the determination is made is to be treated as a registered participant of the organisation at that time or during that period.

Part 4 Miscellaneous

10 Committee may reimburse applicant for certain costs

The Committee may reimburse an applicant for benefits under section 19 of the Act for some or all of the costs incurred in connection with the supply of a certificate or report for the purposes of clause 5 (a) (i), (b) (i), (c) (i), (d) (i) or (ii), (e) (i) or (ii) or (f) (i) or (ii).

11 Repeal

- (1) The Sporting Injuries Insurance Rules 1981 are repealed.
- (2) Any act, matter or thing that was done for the purposes of or, immediately before the repeal of the *Sporting Injuries Insurance Rules 1981*, had effect under those Rules is taken to have been done for the purposes of or to have effect under this Rule.

Schedule 1 Forms

Form 1

(Clause 4 (a))

Sporting Injuries Insurance Scheme

New South Wales

Application for injury benefits by a registered participant.

L.	State—	
a)	Full name:	(a

(b)	Address:	(b)
(c)	Phone no:	(c)
(d)	Date and year of birth:	(d)
(e)	Marital status:	(e)
(f)	Number and ages of dependent children, if any:	(f)
2.	State the name of sporting organisation or club in which you were registered when the injury occurred:	
3.	Provide particulars of the time, date and place of injury and manner in which injury was received (including details of event participated in):	
4.	If the incident in which the injury occurred was witnessed by other persons, state the names and addresses of 2 of those persons:	(a)
	(Attach a statement by a witness as to how the injury occurred—see clause 5 (a) (iii))	(b)
5.	Specify the nature of the injury:	
6.	State names and addresses of attending or treating doctors:	
	(Attach the original or a photocopy of each medical certificate or report obtained with respect to the injury—see clause 5 (a) (i))	
7.	State—	
(a)	full name and office held by the official of the sporting organisation to whom the injury was first reported:	(a)
(b)	time and date the injury was first reported:	(b)
	(Attach a statement by an official confirming applicant was registered as a participant at the time of injury—see clause 5 (a) (ii))	
	s information is required for statistical purp	poses only

1.	What was the total and type of expenses incurred?

	(medical, hospital, dental etc)			
2.	Was any special treatment required (such as phy etc?)	siotherapy, supply of splints or crutches, repair of dentury	res	
3.	What was the cost of the special treatment?			
4.	What was the cost of medical reports? (These m	ay be reimbursed—attach original receipts.)		
<i>Inj</i> (If	Accurate and complete particulars must be provided as required by this form and the Sporting njuries Insurance Rule 1997 or the application may be rejected. If the spaces on the form are insufficient, attach additional pages of particulars.) All particulars provided by me in, or in any attachment to, this application are true.			
		Signature of Applicant		
		Date: /	/19	
No	te:			
	e <i>Sporting Injuries Insurance Act 1978</i> provides a nnection with, this application.	penalty for a false or misleading statement made in, or i	n	
Fo	rm S1			
		(Clause 4	l (b))	
Sup	pplementary Sporting Injuries Scheme			
Ne	w South Wales			
	Application for injury benefits by a school child or participant in an authorised activity of the Department of Sport and Recreation.		port	
1.	State—			
(a)	Full name:	(a)		
(b)	Address:	(b)		
(c)	Phone no:	(c)		
(d)	Date and year of birth:	(d)		
	Marital status:	(e)		
(f)	Number and ages of dependent children, if any:	(f)		

State the name of school or Department at which you were enrolled when the injury occurred:	
Provide particulars of the time, date and place of injury and manner in which injury was received (including details of event participated in):	
If the incident in which the injury occurred was witnessed by other persons, state the names and addresses of 2 of those persons:	(a)
(Attach a statement as to how the injury occurred signed by at least one witness—see clause 5 (b) (iii) or (c) (iii))	(b)
Specify the nature of the injury:	
State names and addresses of attending or treating doctors:	
(Attach the original or a photocopy of each medical certificate or report obtained with respect to the injury—see clause 5 (b) (i) or (c) (i))	
State—	
full name and office held by the official of the school or Department to whom the injury was first reported:	(a)
time and date the injury was first reported:	(b)
(Attach a statement by an official confirming applicant was enrolled as a participant at the time of injury—see clause 5 (b) (ii) or (c) (ii))	
s information is required for statistical pur	poses only
•••	ed?
(medical, hospital, dental etc)	
etc?)	ysiotherapy, supply of splints or crutches, repair of dentur
	Provide particulars of the time, date and place of injury and manner in which injury was received (including details of event participated in): If the incident in which the injury occurred was witnessed by other persons, state the names and addresses of 2 of those persons: (Attach a statement as to how the injury occurred signed by at least one witness—see clause 5 (b) (iii) or (c) (iii)) Specify the nature of the injury: State names and addresses of attending or treating doctors: (Attach the original or a photocopy of each medical certificate or report obtained with respect to the injury—see clause 5 (b) (i) or (c) (ii)) State— full name and office held by the official of the school or Department to whom the injury was first reported: time and date the injury was first reported: (Attach a statement by an official confirming applicant was enrolled as a participant at the time of injury—see clause 5 (b) (ii) or (c) (iii)) s information is required for statistical pury what was the total and type of expenses incurred (medical, hospital, dental etc) Was any special treatment required (such as phyetc?)

(a)	Name of applicant:	(a)
(b)	Relationship to deceased	(b)
(c)	Address:	(c)
(d)	Phone no:	(d)
(e)	Name of deceased:	(e)
(f)	Date and year of birth of deceased:	(f)
(g)	Marital status of deceased:	(g)
(h)	Number and ages of dependent children, if any:	(h)
2.	State the name of sporting organisation or club in which the participant was registered when the injury resulting in death occurred:	
3.	Provide particulars of the time, date and place of injury and manner in which injury was received (including details of event participated in):	

4.	If the incident in which the injury occurred was witnessed by other persons, state the names and addresses of 2 of those persons:	(a)	
	(Attach a statement by a witness as to how the injury occurred—see clause 5 (d) (iv))	(b)	
5.	State names and addresses of doctors certifying death or conducting post mortem examination:		
	(Attach the original or a photocopy of the death certificate and of each medical certificate or report obtained with respect to the injury and death—see clause 5 (d) (i) and (ii))		
6.	State—		
(a)	full name and office held by the official of the sporting organisation to whom the injury was first reported:	(a)	
(b)	time and date the injury was first reported:	(b)	
	(Attach a statement by an official confirming deceased was registered as a participant at the time of injury—see clause 5 (d) (iii))		
Thi	is information is required for statistical purp	poses only	
1.	What was the total and type of expenses incurre	ed?	
	(medical, hospital, dental etc)		
2.	• Was any special treatment required (such as physiotherapy, supply of splints or crutches, repair of denture etc?)		
3.	. What was the cost of the special treatment?		
pro		ring injury, the information referred to above should be blication for benefits. In any case, the following question	
	at was the total of the funeral expenses?		
Acc		ovided as required by this form and the <i>Sporting</i> n may be rejected.	
	(If the spaces on the form are insufficient, attach additional pages of particulars.)		

All particulars provided by me in, or in any attachment to, this application are true.

Signature of Applicant	

Date: / /19

Note:

The Sporting Injuries Insurance Act 1978 provides a penalty for a false or misleading statement made in, or in connection with, this application.

Form S2

(Clause 4 (d))

Supplementary Sporting Injuries Insurance Scheme

New South Wales

Application for death benefits for a deceased person participating in a school activity or an authorised activity of the Department of Sport and Recreation.

1.	State—	
(a)	Name of applicant:	(a)
(b)	Relationship to deceased:	(b)
(c)	Address:	(c)
(d)	Phone no:	(d)
(e)	Name of deceased:	(e)
(f)	Date and year of birth of deceased:	(f)
(g)	Marital status of deceased	(g)
(h)	Number and ages of dependent children, if any:	(h)
2.	State the name of school or Department at which participant was enrolled when the injury resulting in death occurred:	
3.	Provide particulars of the time, date and place of injury and manner in which injury was received (including details of event participated in):	
4.	If the incident in which the injury occurred was witnessed by other persons, state the names and addresses of 2 of those persons:	(a)

	(Attach a statement by a witness as to how the injury occurred signed by at least one witness—see clause 5 (e) (iv) or (f) (iv))	(b)	
5.	State names and addresses of doctors certifying death or conducting post mortem examination:		
	(Attach the original or a photocopy of the death certificate and of each medical certificate or report obtained with respect to the injury and death—see clause 5 (e) (i) and (ii) or (f) (i) and (iii))		
6.	State—		
(a)	full name and office held by the official of the school or Department to whom the injury was first reported:	(a)	
(b)	time and date the injury was first reported:	(b)	
	(Attach a statement by an official confirming deceased was enrolled as a participant at the time of injury—see clause 5 (e) (iii) or (f) (iii))		
Thi	s information is required for statistical purp	poses only	
1.	What was the total and type of expenses incurre	ed?	
	(medical, hospital, dental etc)		
2.	. Was any special treatment required (such as physiotherapy, supply of splints or crutches, repair of dentures etc?)		
3.	What was the cost of the special treatment?		
Unless death occurred immediately or shortly following injury, the information referred to above should be provided (if available) by the person making the application for benefits. In any case, the following question should be answered:			
	What was the total of the funeral expenses?		
Accurate and complete particulars must be provided as required by this form and the <i>Sporting Injuries Insurance Rule 1997</i> or the application may be rejected.			
	he spaces on the form are insufficient, attach ad		
All	All particulars provided by me in, or in any attachment to, this application are true.		
		Signature of Applicant	

Date: / /19

Note:

The Sporting Injuries Insurance Act 1978 provides a penalty for a false or misleading statement made in, or in connection with, this application.