

# **EQUINE ASSOCIATION CLUBS MANAGEMENT LIABILITY**

(BE A MEMBER & RENEW EARLY - INSURANCE EXPIRES JANUARY 1st EACH YEAR)

Acera Insurance is the official insurance broker of most Equine Associations in Canada.

### Questions about this Insurance Program must be directed to Acera.

- Coverage is available for Directors and Officers of member Clubs that are registered societies.
- Management Liability is a special coverage available separately for member Clubs who qualify and apply using the attached application form.
- Management Liability protects directors and their personal assets from law suits brought against them for their actions as directors of a Club. Please review the information provided under "Frequently Asked Questions".
- Please complete and sign the attached Application Form and return it to Acera Insurance. Note that coverage is not effective until we receive the fully completed and signed Application form; the Application has been reviewed and accepted by underwriters; and the premium fully paid.

#### **WESTERN PROVINCES & TERRITORIES:**

100 - 1500 HARDY STREET, KELOWNA, BC V1Y 8H2 Phone Toll Free 1-800-670-1877 Fax 1-888-822-6115 Website: www.capricmw.ca/horse

Email: agri@acera.ca

#### **PROVINCES ONTARIO EASTWARD:**

15221 YONGE STREET, AURORA, ON L4G 1L8 Phone Toll Free: 1-888-394-3330 Fax: 1-888-822-6115 Website: www.capricmw.ca/horse Email: forms@equicare.ca



### NON-PROFIT MANAGEMENT AND CORPORATE LIABILITY INSURANCE POLICY **AGRI-EQUINE D&O PROGRAM - NEW BUSINESS APPLICATION**

THIS IS AN APPLICATION FOR A CLAIMS MADE POLICY WITH DEFENCE COSTS INCLUDED IN THE LIMIT OF LIABILITY. ALL QUESTIONS MUST BE ANSWERED.

Cor	pora	ate Information						
1.	(a)	(a) Name of Parent Corporation (Applicant):						
	(b) Address:							
	(c)	Date of Incorporati	on:	Jurisdiction:				
	(d)	Select desired limit	t: \$1,000,000 [	\$2,000,000	\$3,000,000	\$4,000,000 [	\$5,000,0	000
	(e)	If a Policy is issued	d, do you want to recei	ve it by:	gular Mail [	☐ E-mail		
Оре	erati	onal Activities						
2.	(a) Description of operations:							
	(b)	Select correct form	n of organization:	National Associat Provincial Associa Local or Regional	ation			
	(c)	Does the Corporation have the right to appoint more than 50% of the board members of any affiliated (ie. not owned) entity?					Yes 🗌	No 🗌
	(d)	Percentage of the services provided or activities performed outside of Canada:					_	%
	(e)	Number of volunteers: Number of employees located in: Canada: Other Countries:						
	(f)	Are any layoffs or reductions of employees anticipated within the next two years?  Yes  No [						
	(g)	Does the Corporat	ion have written emplo	yment guidelines,	policies and proce	dures?	Yes 🗌	No 🗌
	(h)	Is authorization fro	m an Officer or Manag	er required prior to	terminating an en	nployee?	Yes 🗌	No 🗌
	If y	es to (c) or (f) abov	ve, attach details. If n	o to (g) or (h) abo	ve, describe altei	nate controls		
3.	(a)	If the Corporation holds a charitable status, has this status ever been revoked or been subject to review?					Yes 🗌	No 🗆
	(b)	) Is the Corporation currently, or has it at any time during the past three years been, in arrears in its payments to the Canada Revenue Agency or the provincial ministries of revenue (including source deductions, G.S.T, H.S.T. and P.S.T)?					Yes 🗌	No 🗆
	(c)	c) Is the Corporation currently, or has it at any time during the past three years been, in breach of any of its debt covenants or loan agreements, or does it anticipate any such breach occurring within the next twelve months?					Yes 🗌	No 🗆
	If y	es to any of the ab	ove, attach details.					
4.	For	the most recent consolidated fiscal year-end provide the following financial information for the Corporation:						
	(a) \	a) Year-end Date: (b) Total Cash: \$ (c) Total Revenues: \$						
	(d) 1	d) Net Income: \$ (e) Total Assets: \$ (f) Total Liabilities: \$_						
5.	Pro	ovide details of any Directors' and Officers' liability insurance policy currently held (or check here if none 🗌 )						
		Name of Insurer	Limit of Policy	Deductible	Expiry Date	Premium	Claims	(Y/N)
	*If .	vou answored "V"	above to Claims no	asa provida data	ile including the	amounts na	id	

\*If you answered "Y" above to Claims, please provide details, including the amounts paid.

6. During the past three years, has the Corporation or any person(s) applying for this insurance been involved in:

(	(a) receipt of any declination, cancellation or non-renewal of any insurance similar to that now applied for?			No 🗌	
(		elivering written notice under the provisions of any Directors' and Officers' or notices liability insurance policy of any claim, or notice of potential claim?	Yes 🗌	No 🗌	
(		which has been made or is now pending, which would fall within the scope of ce policy similar to that now proposed if such insurance had been in force?	Yes 🗌	No 🗌	
(	d) any claim w to that now	where loss payments have been made under any insurance policy similar proposed?	Yes 🗌	No 🗌	
(		st, combines, price fixing, restraint of trade, tax, copyright or patent nt proceeding?	Yes 🗌	No 🗌	
(	) any civil, cri	iminal, administrative or regulatory investigation or proceeding?	Yes 🗌	No 🗌	
(	g) any pollutio	n suits or claims	Yes 🗌	No 🗌	
(	n) any receive	ership or insolvency or bankruptcy proceeding?	Yes 🗌	No 🗌	
ı	yes to any of	the above, attach details.			
THE	APPLICANT D	OES HEREBY PROVIDE THE FOLLOWING WARRANTY TO THE INSURER			
h g	ave knowledge ive rise to a cla	ration or any director, officer or any other person proposed for this insurance or information of any fact, circumstance or situation which could reasonably aim which would fall within the scope of the proposed insurance?	Yes 🗌	No 🗆	
"	Yes, provide d	ietalis.			
С	It is understood and agreed that if knowledge of any such facts, circumstances or situations exists, whether or no disclosed, any claim or action subsequently arising or developing therefrom shall be excluded from coverage under any policy issued by Trisura Guarantee Insurance Company.				

#### PRIVACY DISCLOSURE AND CONSENT

The undersigned authorized officer of the Parent Corporation acknowledges that any personal information provided in connection with the insurance applied for, including but not limited to the information contained in this Application, has been collected in accordance with all applicable privacy legislation. The undersigned confirms that all necessary consents have been obtained for the collection, use, and disclosure of such information for the purposes of any investigation and inquiry in connection with this Application for insurance and, if applicable, investigating and settling claims, detecting and preventing fraud, and acting as required or authorized by law.

#### **FALSE INFORMATION**

Any person who, knowingly and with intent to defraud any insurance company or other person, files an Application for insurance containing any false information, or conceals information concerning any fact material thereto for the purpose of misleading any insurance company or other person, commits a fraudulent insurance act which is a crime.

#### **DECLARATIONS AND SIGNATURE**

The undersigned authorized officer of the Parent Corporation:

- (i) declares, after inquiry, that the statements and representations set forth in this Application, and all materials submitted to or requested by the Insurer in conjunction with this Application, are true;
- (ii) acknowledges that these statements, representations, and materials are relied on by the Insurer and that they shall be deemed material to the acceptance of the risk assumed by the Insurer under the insurance applied for, should the insurance be effected;
- (iii) agrees that if the information supplied in connection with this Application changes between the date of this Application and the effective date of any insurance effected pursuant to this Application, the undersigned will immediately notify the Insurer of such changes, and the Insurer may withdraw or modify any outstanding indications, quotations and/or authorization or agreement to effect the insurance; and
- (iv) acknowledges that any personal information provided in connection with the insurance applied for, including but not limited to the information contained in this Application, has been collected in accordance with all applicable privacy legislation. The undersigned confirms that all necessary consents have been obtained for the collection, use, and disclosure of such information for the purposes of any investigation and inquiry in connection with this Application for insurance and, if applicable, investigating and settling claims, detecting and preventing fraud, and acting as required or authorized by law.

Signing of this Application does not obligate the Parent Corporation or the Insurer to effect the insurance, but it is agreed that all materials submitted to or requested by the Insurer in conjunction with this Application are hereby incorporated by reference into this Application and made a part hereof. Terms and conditions, including limits of coverage, offered by the Insurer may differ from those applied for by the Parent Corporation. It is further agreed that this Application and all materials submitted to or requested by the Insurer in conjunction with this Application are the basis of and are deemed attached to and incorporated into any policy effected pursuant to this Application.

PLEASE NOTE: COVERAGE CANNOT BE BOUND UNLESS THIS APPLICATION HAS BEEN FULLY COMPLETED AND DULY SIGNED AND DATED.

Parent Corporation	Date
Signature of duly authorized signing Officer	Title

#### MANAGEMENT LIABILITY PREMIUM CALCULATION

#### Coverage is not in effect until:

- 1. We receive the fully completed, signed and dated Application; AND
- 2. The Application has been reviewed and accepted by underwriters; AND
- 3. We receive the full premium payment.

Cash + Annual Revenues	\$1,000,000	\$2,000,000	\$3,000,000	\$5,000,000
\$0 - \$25,000	\$155	\$309	\$412	\$515
\$25,001 - \$100,000	\$361	\$464	\$567	\$721
\$100,001 - \$500,000	\$515	\$670	\$798	\$927
\$500,001 - \$1,000,000	\$592	\$773	\$953	\$1,288
Over \$1,000,000	Refer	Refer	Refer	Refer

Limit Requested:	\$1,000,000	\$2,000,000	\$3,000,000	\$5,000,000	
Total Payable:	·	D PST IF APPLICAB B=0%; BC=0%; MB=7		; NS=0%; NT=0%; ON=8°	%; PE=0%; SK=6%; YT=0%)



## Management Liability (D&O) Frequently Asked Questions

- Q1 I have been told that liability insurance for clubs covers directors. Why then is Director's & Officer's coverage discussed so much and sold separately? What is this all about?
- A1 Commercial General Liability policies respond to law suits which result from a bodily injury or a property damage in which it is felt the club bears some responsibility. Your policy covers this and also covers directors and others associated with hosting club activities for these types of claims. However there are other things for which a director or officer may be sued which have nothing to do with a bodily injury or a property damage. Typically these law suits are the result of a wrongful act by a director and are filed by another director, club member or a financial institution. Director's and Officer's Liability coverage deals with these situations.
- Q2 What is a wrongful act?
- A2 It is an actual or alleged negligent act, error, omission, misstatement, misleading statement, neglect or breach of duty by the Directors and Officers, individually or collectively, in the discharge of their legal duties solely in their capacity as Directors and Officers of the society.
- Q3 Why buy D&O Liability insurance?
- A3 The purpose of a D&O liability insurance policy is to provide coverage for damages, judgments, costs and defense of legal actions, claims or proceedings. The coverage provides the following protection:
  - 1. Protection of personal assets, as well as spouse's,
  - 2. Defense regardless of whether or not allegations are true
  - 3. Resources for defending the claim
  - 4. Reduction in reliance on the society:

Bylaws contain indemnification provisions to protect the Directors & Officers. Despite these provisions, circumstances could exist where indemnification <u>may not</u> occur (the society is financially impaired, becomes insolvent or is not capable of providing funds for defense or resulting damages).

- Q4 What are my legal responsibilities under the law?
- A4 Under the law, Directors & Officers must (1) act in good faith and in the best interest of the society (2) act with a duty of care as a reasonably prudent person (3) perform duties in accordance with applicable statutes and your own charter.
- Q5 Under what statutes can a director or officer be liable under?
- A5 The following are Federal and Provincial Statutes a Director or Officer can be liable under:
  - Income Tax Act
  - 2. Employment Standards Act
  - 3. Bankruptcy Act
  - 4. Pension Benefits Act
  - 5. Competitions Act
  - 6. Unemployment Insurance Act
  - 7. Discrimination Act
  - 8. and more
- Q6 What are some examples of claims?
- A6 1. Negligence of account procedures and mishandling of funds;
  - 2. Personal benefit by a Director;
  - 3. Jeopardizing tax-exempt status:
  - 4. Interest that should have been collected and distributed;
  - 5. Failure to adopt and implement appropriate safety and operational procedures at a facility causing the facility to be shut down by regulators.
- Q7 Our club is interested in Directors & Officers Liability insurance to protect our directors. This coverage is an option on the insurance program and we are wondering about the need and the expense.
- A7 The protection provided to directors under most Society Acts has weakened over the past few years as cases are tested in the courts. We are able to arrange Director's & Officer's liability insurance for your club. Often directors are reluctant to vote for the expense of buying this coverage for the board because they feel it may be considered somewhat selfish. The members of a club on the other hand should support this purchase and protect the people who freely offer their time to the running of club affairs.
- Q8. Does my policy cover me for claims arising from COVID-19 or other communicable disease?
- A8. No. Effective October 1, 2020 the Insurer has embedded a specific exclusion in the wording related to this, however, it applies to the Entity only. The Exclusion and response to the pandemic is consistent with what we are seeing from Insurers around the world.

(rev Oct 1-20)