



## Insurance application

Professional Sports Cover, Team athlete

Insurance as referred to in the Act on athletes' accident and pension cover (276/2009)

Policyholder	Official name of sports club		Business ID
	Address	Postal code	Town/City
	Team name		
	Sports club's contact person's name		Telephone
Insured person	Surname and given names		Personal identity number
	Address	Postal code	Town/City
Contract data	Validity period of contract concluded between sports club and athlete		
	Starting date (month and year)	Termination date (month and year)	
	Type of sports		
	The amount of taxable fee for a playing season, which is payable to the athlete under a contract		Euro
	Salary/fees Bonus Taxable fringe benefits Total		
Team athlete	Salary paid by the previous sports club for the same playing season	Sports club and contract period	
Beneficiary	<p>The beneficiary of old-age pension is always the insured. In statutory workers' compensation insurance, beneficiaries are determined in accordance with the Workers' Compensation Act (459/2015). The beneficiary of death benefit is the insured persons's</p> <p><input type="checkbox"/> next of kin    <input type="checkbox"/> other person, specify</p>		
Commencement of insurance cover	Insurance cover takes effect at 12.00 p.m. on a day the insurance application is submitted to OP Insurance and when the insurance is granted. The insurance can, upon a separate agreement with OP Insurance, take effect on another date.		
Foreign tax liability of customer	<p>Do you have to pay taxes abroad?</p> <p><input type="checkbox"/> No    <input type="checkbox"/> Yes, please specify each country and its tax identification number</p> <p>Owing to international agreements made by the Finnish state and to regulations binding upon us, our company is obliged to identify the country where our customers are domiciled and therefore pay their taxes, and report taxpayers' details to the tax administration. The duty to identify and report also applies to beneficiaries of pension cover included in Professional Sports Cover. Our company is also obliged to report to the Finnish tax administration any customers who have not submitted their details or whose details have not been obtained for any other reason. It is important for you to answer even if you may not think it is important in your case.</p>		
Date and signature	Place and date		
	Policyholder's signature and name in block letters		
Date, signature and approval	I hereby approve that OP Insurance Ltd can release my name and personal identity number to the sports federation.		
	Place and date		
Sales data	Sold by		
	Assisted in sales by	Deviating sales region <input type="checkbox"/> No commission	