



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	nination 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.					
	Salary/fees					
	Bonus					
	Taxable fringe benefits					
	Total					
eam athlete	Salary paid by the previous sports club for the same playing season Sports club and contract period					
ommencement on surance cover	of Insurance cover takes effect at 12.00 insurance is granted. The insurance ca	p.m. on a day the insu an, upon a separate ag	rance application reement with Po	is submitted to hjola Insurance,	Pohjola Insurance and when the take effect on another date.	
Date, signature and approval	Place and date					
	Policyholder's signature and name in block letters					
Sales data	Sold by					
	Assisted in sales by				Deviating sales region	
					■ No commission	