Special Events Liability Insurance

Optional Liquor Liability Coverage Available

- 4-H Clubs
- Antique Shows
- Auctions
- Banquets
- Bazaars
- Beauty Contests
- Cave Exploration
- Consumer Shows
- Contests
- Demolition Derbies
- Educational Exhibitions
- Fairs
- Fashion Shows
- Festivals
- Fishing Derbies
- Flower Shows
- Fraternals
- Garden Shows
- Graduations
- Inflatables
- Luncheons
- Marathons
- Meets
- Moonwalks
- Motor Sports
- Parades
- Picnics
- Proms
- Rap Performances
- Rock Concerts
- Soap Box Derbies
- Telethons
- Tractor Pulls
- Trade Shows
- Zoo Outings
- Etc.
Special Event Liability Insurance Request for Quotation

Please complete the following application. Once the application is received, a quotation will be sent within one business day. As special events vary, some questions may not be applicable. Please indicate “N/A” where necessary.

**Section 1. General Information**

Name of Applicant

Address of Applicant

Phone Number

E-mail Address

Dates and Times of Event

Name of Event

Location of Event

Does the Facility Carry Liability Insurance?  □ Yes  □ No

Estimated Daily Attendance

Estimated Total Gross Receipts ($)

Description of Event

**Section 2. To Be Completed if Event Includes Alcohol**

Provide Copies of any Marketing or Advertising Documents

Is Liquor to be Sold at this Event?  □ Yes  □ No

May Patrons Bring their own Liquor?  □ Yes  □ No

Total Estimated Alcohol Receipts per Day ($)

Estimated Number of Attendees Consuming Alcohol Daily

Is Applicant the Sole Vendor of Alcohol at the Event?  □ Yes  □ No

If No, Please List Number of Vendors Serving Alcohol

Are all Participating Alcohol Vendors Required to Carry Liquor Liability Insurance?  □ Yes  □ No

Is a Liquor License Required for the Event?  □ Yes  □ No

Will Alcohol be dispensed by a Professional Bartender?  □ Yes  □ No

Describe Training and/or Experience of Persons Serving Alcohol

_____________________________________________________________________________
Section 4. To Be Completed if Event Includes a Parade

Provide a Copy of the Parade Route

Has the Parade Route been approved by the Local Authorities?  □ Yes  □ No

Will the Parade Route be secured by Police?  □ Yes  □ No

Are Parade Participants Permitted to Throw Objects?  □ Yes  □ No

Objects to be Thrown

Section 5. To Be Completed If Event Includes Athletics

Provide Copies of Participant Enrollment Forms

Number of Estimated Athletic Participants per Day  □ Adult  □ Youth

Will Athletic Participants Sign Waivers and/or Release of Liability Forms?  □ Yes  □ No

Section 6. To Be Completed if Event Includes Tractor Pulls, Demolition Derbies or Rodeos

Provide Diagram of Event Facility

Is the Event Location Specifically Designed for this Activity?  □ Yes  □ No

Are Barriers in place to Ensure Spectator Safety?  □ Yes  □ No

What is the Distance Between Barriers and Spectators?

Will the Event Include Spectator Participation?  □ Yes  □ No

Section 7. To Be Completed if Event Includes Inflatable or Amusement Devices

Provide Description of Each Amusement Item

Does the Amusement Device Provider have Liability Insurance?  □ Yes  □ No
Section 8. To Be Completed by All Applicants

Are the Amusement Device Operators provided Manufacturer's Operating Manuals? □ Yes □ No
Are the Amusement Device Operators at least 19 Years of Age? □ Yes □ No
Do the Amusement Device Operators Test Equipment Prior to Day of Use? □ Yes □ No
Do the Amusement Device Operators Monitor for Patron Alcohol Use? □ Yes □ No
Will there be a Mechanical Bull Device? □ Yes □ No
Will there be a Zip Line? □ Yes □ No

How Many Vendors will be Present?

Does Each Vendor have Liability Insurance? □ Yes □ No
Who is Responsible for Providing Security?

Is Security Armed or Unarmed? □ Armed □ Unarmed
Are Fireworks or Pyrotechnics Involved in the Event? □ Yes □ No
Will there be Overnight Camping? □ Yes □ No
If Displaying Vehicles, will Vehicles Remain Stationary? □ Yes □ No
Does the Applicant have a Risk Management Plan? □ Yes □ No
Has Prior Insurance ever been cancelled? □ Yes □ No
Have Claims Been Filed in the Past? □ Yes □ No

Section 9. Additional Insureds

Addition Insured Entity #1

Name of Applicant

Address of Applicant

Relationship  □ Landlord  □ Venue  □ Event Operator  □ Franchisor/Franchise Owner
□ Independent Contractor  □ Other (specify)
□ Add Primary and Non-Contributory Clause
□ Add Waiver of Subrogation

Addition Insured Entity #2

Name of Applicant

Address of Applicant

Relationship  □ Landlord  □ Venue  □ Event Operator  □ Franchisor/Franchise Owner
□ Independent Contractor  □ Other (specify)
□ Add Primary and Non-Contributory Clause
□ Add Waiver of Subrogation
Section 10. Acknowledgements and Signatures

a. Fraud Warning  Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material there to, commits a fraudulent insurance act, which may be a crime.

b. Applicant’s Acknowledgement  I, the applicant, declare, to the best of my knowledge and belief, that all statements and answers in this application are true and complete. I understand and agree that (a) this application will form part of any policy issued, (b) no information given to or acquired by any representative of the Company will bind it, unless it is in writing on this application, (c) no waiver or modification will bind the Company unless it is in writing and is signed by an executive officer of the Company, and (d) only those persons eligible under the terms of an issued policy will be insured.

Signed for the Proposed Policyholder
Signed by Licensed Agent
Agency Name and License Number
Date
Agent Phone Number
Agent E-mail Address
Agency Mailing Address