***SPECIAL EVENTS LIABILITY APPLICATION***

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| --- |
| Name of Insured:       |
| Address:       |
| Broker:       | Effective Date:       to       |
|  |
| Event (Full Description):       |
| Event Location:       |
| Revenue:       |
| Prize Offer, if applicable: (Include Value)       |
|  |
| Are there activities that will involve bouncy castles, trampolines, or water sports? Yes [ ]  No [ ]  |
| Live Music: Yes [ ]  No [ ]  | Description:       |
| Food Served: Yes [ ]  No [ ]  | Description:       |
| Alcohol Served: Yes [ ]  No [ ]  | Description:       |
| If a third party is responsible for liquor, is there a legal liability policy in force and a certificate of insurance issued; with the applicant as the additional named insured? Yes [ ]  No [ ]  |
| Full description of activities:       |
|  |
| Bleachers or Grandstands used?       |
| Are there safety measures in place for: parking, security, trampolines, first aid, and/or supervision? Describe:       |
|  |
| **Coverage Limits:**  | [ ]  $1,000,000 | [ ]  $2,000,000 | [ ]  $5,000,000 |
| **Previous Insurance:**  |
| Name of Previous Carrier:       | Previous Policy #:       |
| Have there been any *losses* or *claims* by the applicant in the past 5 years? If yes, complete below: [ ]  No [ ]  Yes |
| Date of Loss | Location # | Cause | Paid Amount | Insurance Company | Policy # |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Signature of Insured: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_