





11. Previous Experience producing this type of event: \_\_\_\_\_

\_\_\_\_\_

12. Will grandstands or bleachers be used? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, describe construction:

\_\_\_\_\_

Capacity: \_\_\_\_\_ Condition \_\_\_\_\_

13. Describe safety measures and risk management plans in force, i.e. parking, traffic, security, supervision, first aid, emergency evacuation procedures, etc.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

14. Has any company previously declined or cancelled any insurance coverage? Yes: \_\_\_\_\_ No: \_\_\_\_\_

15. Previous Insurer: \_\_\_\_\_

Name & Policy Number: \_\_\_\_\_

16. Previous Premium: \_\_\_\_\_

17. Limits Requested: \_\_\_\_\_

18. Previous Loss History in the past five years: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please note that this is an application only. It does not constitute an insurance policy. Insurance shall become effective only on the issuance of a policy or written binder specifically authorized by the Company or Agency. Quotations will be based upon the information provided and the applicant warrants that this information is true.

Authorized Signature: \_\_\_\_\_

Please Print Name: \_\_\_\_\_

Position or Title: \_\_\_\_\_ Date: \_\_\_\_\_

Premium Due \_\_\_\_\_ (use accompanying chart)