



- Deerfield Insurance Company
- Evanston Insurance Company
- Essex Insurance Company
- Markel American Insurance Company
- Markel Insurance Company
- Associated International Insurance Company

SPECIAL EVENT SUPPLEMENT

(Include Acord application)

APPLICANT INFORMATION:

Applicant's Name: _____ Location Address: _____
 Mailing Address: _____

A. Description Of Event (attach any flyers, brochures, etc.):

1. Maximum daily attendance: _____ Total attendance: _____ Sales: \$ _____
2. Length of event: _____ Estimated age group of audience: From _____ to _____
3. Number of Participants: _____
4. Do participants sign waiver of liability agreements? Yes No

B. Applicants Experience in conducting events of this similar nature:

1. Has this event been held before? Yes No
 If yes, how many years? _____

C. Rides:

1. Will rides be provided? Yes No
 If yes, type of rides: _____
2. Do rides have signs clearly marking age, height, and size limitations? Yes No

D. Entertainment:

1. Will live entertainment be provided? Yes No
 If yes, please describe: _____
2. If a concert, type of music:

<input type="checkbox"/> Classical	<input type="checkbox"/> Jazz	<input type="checkbox"/> Rap	<input type="checkbox"/> Blue Grass	<input type="checkbox"/> Country/Western
<input type="checkbox"/> Gospel	<input type="checkbox"/> Gothic	<input type="checkbox"/> R & B	<input type="checkbox"/> Hard Rock	<input type="checkbox"/> Heavy Metal
<input type="checkbox"/> Alternative	<input type="checkbox"/> Hip hop	<input type="checkbox"/> Other: _____		

3. If fireworks are planned, is pyrotechnician licensed and insured? Yes No
4. Does applicant obtain a certificate naming him as an additional insured? Yes No
5. Distance between fireworks staging area and audience? _____
6. Spectators allowed in fireworks staging area? Yes No

E. Security: (indicate type and number of each)

- Independent security company _____ Off-duty police _____ Employed security _____
- Chaperons _____

1. Is there a written emergency plan in the event of an accident? Yes No
2. Does independent security company provide a certificate of insurance? Yes No

F. Stadiums:

1. Are bleachers or platforms to be used? Yes No
 If yes, type: Portable Permanent Back and side railings provided? Yes No
 Construction: Wood Steel Concrete Height in feet: _____'
 Age of bleachers or platform: _____

2. Are patrons protected from and warned against potential flying objects? Yes No
3. Are patrons allowed on the field, track, or pit area? Yes No
4. Is public address system clearly audible in all parts of the facility? Yes No
5. Is there a backup electrical supply for lighting and the public address system? Yes No

G. Traffic Control:

1. Who is responsible for crowd and traffic control? _____
2. Are parking areas smooth with clearly marked parking areas and exit roads? Yes No
3. Is parade route able to handle size and height of floats and are cross streets barricaded? Yes No

H. Liquor:

1. Is liquor to be served by applicant? Yes No
 If yes, please explain: _____
2. Does applicant want: Host liquor Liquor Liability (available in selected states only)
3. Is liquor to be served by others? Yes No
 If yes, please explain: _____

I. First Aid:

1. Will first aid facilities be provided at the event? Yes No
 If yes, please describe _____
 If yes, who will be in charge of the facilities? Doctors Nurses Others: _____

2. If applicant is the sponsor, does the operator have liability insurance? Yes No
If yes, name of insurance carrier: _____
Policy limits of liability: \$ _____

J. Hold-harmless Agreements:

1. Is applicant held harmless by others? Yes No
2. Does applicant agree to hold any third party harmless? Yes No
If yes, who? _____
3. Do independent contractors and vendors provide proof of General Liability coverage, including products? Yes No

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. This application does not bind any of the parties to complete the insurance transaction.

Applicant's Signature

Producer's Signature

Date