



# Allen Financial Insurance Group

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## MUSICAL AND RECORDING ARTISTS QUESTIONNAIRE

Please complete this application, in addition to Acord 125 and Acord 126, and send all attachments.

Agent/Broker: \_\_\_\_\_ Date of Application \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

E-Mail \_\_\_\_\_ Fax Number: \_\_\_\_\_

### APPLICANT INFORMATION

1. Name of Applicant: \_\_\_\_\_

2. Number of Band Members: \_\_\_\_\_

3. Type of music band plays:  
 Country       RAP       Classical       Hard Rock/Heavy Metal  
 R & B       Pop       Jazz       Other (specify)

4. Estimated number of concerts /performances (*attach itinerary*): \_\_\_\_\_

5. Estimated Annual Payroll Amount: \$ \_\_\_\_\_

6. Internet Address \_\_\_\_\_

7. Type of facilities where group performs:  
 Nightclub    Bar    Stadium    Indoor Theater    Concert Hall    Other: \_\_\_\_\_

8. Is Applicant signing any Lease of Premises Agreements with performance venue owners?       Yes    No  
If yes, attach a copy

9. Does Applicant's act contain any unusual props, set pieces, stunts, laser lighting or pyrotechnics?       Yes    No

10. Does Applicant currently have an album/CD out in the stores?       Yes    No

11. Are any of the songs currently getting any airplay on TV and/or radio?       Yes    No  
If yes to any, describe: \_\_\_\_\_

12. Estimated number in Attendance at each Concert:  
Smallest: \_\_\_\_\_ Largest: \_\_\_\_\_ Average Size: \_\_\_\_\_

13. Number years experience Applicant has as a single/performer \_\_\_\_\_

14. Attach Schedule of Equipment. Describe burglary and fire protection measures of equipment when in storage and when on the road.  
\_\_\_\_\_  
\_\_\_\_\_

15. Estimated cost of hire for: Busses \$ \_\_\_\_\_ Other than Busses \$ \_\_\_\_\_

**Please supply copies all busing/trucking contracts.**

16. Describe throwing/tossing of objects habits by Applicant. What is thrown/tossed during performances?

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17. Does the group self-promote?  Yes  No

If yes, please describe: \_\_\_\_\_

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18. Is there a separate promoter who signs the Lease of Premises Agreement with performance venues?  Yes  No

If yes, please describe: \_\_\_\_\_

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19. Who responsible for Spectator Liability? \_\_\_\_\_

a) If not responsible, is Applicant named as an additional insured on other's policy?  Yes  No

b) Will Applicant obtain a Certificate of Insurance?  Yes  No

20. Indicate and provide details on the following operations/activities which are performed by you, your employees, or subcontractors:

|                     | Insured                  | Subcontractors           | Details |
|---------------------|--------------------------|--------------------------|---------|
| Staging/Lighting    | <input type="checkbox"/> | <input type="checkbox"/> |         |
| Audio/Video Rigging | <input type="checkbox"/> | <input type="checkbox"/> |         |
| Security            | <input type="checkbox"/> | <input type="checkbox"/> |         |
| Merchandise Sales   | <input type="checkbox"/> | <input type="checkbox"/> |         |

21. For all subcontracted operations, are certificates obtained by the Applicant?  Yes  No

22. Describe any special effects, rigging and/or staging planned, or any animals to be used:

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23.  Attach prior & current schedules