

# Special Event Fast Track Application

Quote, Bind & Issue Self Rater

## Comprehensive General Liability Insurance

A+ Admitted Insurer

Each Occurrence Limit	\$1,000,000
General Aggregate Limit	\$3,000,000
Products & Completed Operations	\$1,000,000
Personal Injury & Advertising Injury	\$1,000,000
Host Liquor Liability	\$1,000,000
Contractual Liability	\$1,000,000
Premises Rented To You	\$100,000
Blanket Additional Insureds	Included

### Insured Information

Name of Insured: \_\_\_\_\_

Entity Type:  Individual  Corporation  LLC  Non-Profit  Other \_\_\_\_\_

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

City \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Web Site: \_\_\_\_\_

### Qualification Questions

Will there be more than 1,000 persons in attendance Yes  No   
Any: Stunts, Pyrotechnics, Aircrafts, Car Races, Mechanical Devices, Film Yes  No   
Production, Bounce Houses, Animals, Rides, Water Activity or  
Other Hazardous Activities?

Will The Event Take Place in the United States? Yes  No

Any Armed Private Security Guards Hired By You or Your Company? Yes  No

Have You Had Any Liability or Property Losses in the Past 5 years? Yes  No

Will alcohol be served at the event? Yes  No

If yes, will you make profit off the sale of alcohol? Yes  No   
If yes, please describe on separate sheet of paper

Projected Sales: \$ \_\_\_\_\_ Projected Profit: \$ \_\_\_\_\_.



# Allen Financial Insurance Group

Event Classification	Code	Event Classification	Code
<input type="checkbox"/> Amateur Assn Meeting	3310	<input type="checkbox"/> Educational Exhibition	5112
<input type="checkbox"/> Anniversary Party	5510	<input type="checkbox"/> Engagement Party	5521
<input type="checkbox"/> Baby Shower	5511	<input type="checkbox"/> Family Reunion	5522
<input type="checkbox"/> Ballet	4411	<input type="checkbox"/> Instructional Class	4210
<input type="checkbox"/> Banquet	5512	<input type="checkbox"/> Ladies Club Events	3319
<input type="checkbox"/> Baptism	5513	<input type="checkbox"/> Lecture	4211
<input type="checkbox"/> Bar Mitzvah	5514	<input type="checkbox"/> Luncheon	3320
<input type="checkbox"/> Bingo Game	5410	<input type="checkbox"/> Math Tournament	5415
<input type="checkbox"/> Birthday Party	5515	<input type="checkbox"/> Menorah Lighting	5525
<input type="checkbox"/> Book Signing	3311	<input type="checkbox"/> Music Recital	9220
<input type="checkbox"/> Bridal Shower	5517	<input type="checkbox"/> Opera	4131
<input type="checkbox"/> Business Meeting	3312	<input type="checkbox"/> Poetry Reading	4313
<input type="checkbox"/> Business Party	5518	<input type="checkbox"/> Seminar	4212
<input type="checkbox"/> Chess Tournament	5414	<input type="checkbox"/> Social Gathering / Meeting	5536
<input type="checkbox"/> Choir	4121	<input type="checkbox"/> Speaking Engagement	4213
<input type="checkbox"/> Christian Concert	4122	<input type="checkbox"/> Spiritual Music	4162
<input type="checkbox"/> Church Service	3313	<input type="checkbox"/> Symphony Concert	4163
<input type="checkbox"/> Civic Club Meeting	3314	<input type="checkbox"/> Teleconference	3324
<input type="checkbox"/> Classical Music Concert	4123	<input type="checkbox"/> Vendor less than 8 days	7110
<input type="checkbox"/> Dance Recital	4414	<input type="checkbox"/> Wedding Reception	3210
<input type="checkbox"/> Funeral	3318	<input type="checkbox"/> Wine Tasting	5538

If your event does not meet Fast Track class criteria please use the Standard Special Event Application.

Dates of Event: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ (same date if one day)

Event Name: \_\_\_\_\_

Type of Event: \_\_\_\_\_ Event Class Code \_\_\_\_\_

Average Daily Attendance \_\_\_\_\_ Athletic Participants/Performers: \_\_\_\_\_

Venue Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Event Description: \_\_\_\_\_

Budget: (Total cost of event): \$ \_\_\_\_\_ Cost of Admission \$ \_\_\_\_\_

Event will be:  Indoors  Outdoors  Partially Outdoors

## Event Premium Calculation

<b>Type of Event</b>	<b>Code</b>	<b>Rate</b>	<b>Premium</b>
_____	_____	\$175.00	\$175.00
<b>Blanket Additional Insureds</b>			Included
<b>Waiver of Subrogation</b> (Option)		\$50.00	\$_____
<b>AREA RPG Fee</b>		\$25.00	\$_____
<b>Total Event Premium</b>			\$_____

**Additional Insured's** (if any) Use space provided below if custom wording or requirements are needed

**Additional Insured /**  Check here if venue is to be added as an additional insured as it is listed above  
Name \_\_\_\_\_

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City State Zip Code

**Additional Insured #2** (use additional sheet if needed)  
Name \_\_\_\_\_

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City State Zip Code

It is understood and agreed that the completion of this application shall not be binding either to the proposed insured or to the Company until accepted by the Company or Companies but that the information contained herein shall be the basis of the Contract should a policy be issued.

I/We hereby make application for membership and insurance participation for the event(s) shown above. Enclosed is payment for insurance, policy and membership fees with the American Recreation & Entertainment Alliance. I/We agree to abide by its rules, regulations and bylaws. Membership begins January 1, or application and acceptance date if later and expires on December 31, of current year.

I/We understand and agree that any misstatement of warranty or fact on this application shall be considered a violation of coverage afforded under any policy issued on the basis of this application. I/We understand and agree that this application shall form part of any policy issued or in effect and that the Company requires that I/We obtain certificates of insurance from independent contractors naming member as additional insured. I/We understand any policy issued will not provide Worker's Compensation, Property, Automobile or Care, Custody and Control coverage. I/We agree to pay reasonable attorneys fees, costs and expenses necessarily incurred if suit or collection becomes necessary (not to exceed 50%).

Complete as early as possible prior to opening date of sanctioned event. I/We agree that, if this application is sent to you by facsimile or other electronic means, you may act upon it whether or not you receive an original hard copy. Coverage is not provided for events, activities or show dates that have not been declared and approved by the insurance company in writing prior to the event.

