



**PROGRAMMED
INSURANCE
BROKERS**

Formerly **ROSS** INSURANCE BROKERS

EVENT INSURANCE - USER GROUP APPLICATION

FACILITY	
Name of Facility Being Used	
Address of Facility Being Used	
Contact Person Name	Phone
Contact Person E-mail	
Facility Owner/Operator Name	
Facility Owner/Operator Address	
RENTER / USER	
Renter / User Group Name (Applicant)	Contact Name
Renter's address	
Phone	Fax
E-mail	
Expected attendance	
Type and specific details of the event	
Number of days of the event	Date from Date to
Hours of the event	
Will alcohol be served? YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, will it be free of charge? YES <input type="checkbox"/> NO <input type="checkbox"/>
If yes, what controls are in place to limit consumption?	
	Special Event Liquor License must be provided prior to insurance being effective.
Additional Insured:	The certificate of Insurance will name the Facility Owner and/or Operator as an additional insured
NOTICE TO APPLICANTS:	<i>This application does not bind the Applicant, Ross Insurance Brokers, or the Insurer, but it is agreed that this application will be the basis of the contract should a Certificate be issued, and it will be attached to and made a part of the certificate</i>
	<i>The Applicant represents that if the information supplied on this application changes between the date of this application and the time when the certificate is issued, the Applicant will immediately notify Ross Insurance Brokers of such changes</i>
	<i>between the date of this application and the time when the certificate.</i>
Applicant Signature:	Date:
User Group Charge \$	Payment Type: Ross Insurance Representative: