

Event Insurance Services Ltd.

Freepost, Ringwood, Hants BH24 1AJ

Telephone 0800 515980 Fax 01425 474905

email info@events-insurance.co.uk web www.events-insurance.co.uk

Complete and return with your remittance to the above address, making cheques payable to Event Insurance Services Ltd, or complete the following for card payments.

(Visa/MasterCard//Maestro/Solo/Other _____)

CARD NUMBER

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

EXPIRY DATE **ISSUE N°** Switch Only **SECURITY CODE** **VALID FROM**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

Please charge my account with £

Name as on card

Address of card holder

Postcode

Signature Date

Broker details

Exclusively arranged by



Ref

Issue No. 09/02

public liability

This protects your legal liability to pay for compensation and claimant's costs and expenses for accidental bodily injury and loss of or damage to property sustained by members of the public, occurring in connection with your event.

The cover should be based on the total number of visitors expected to attend the event throughout the whole period of insurance.

employer's liability

Protects your legal liabilities in respect of compensation and claimant's costs and expenses for accidental bodily injury to anyone you employ at an event, including temporary staff, volunteers or helpers, whether paid or unpaid.

event equipment

Covers your liability in respect of the accidental loss of or damage to event equipment for which you are legally responsible, both at your event and in transit to or from the venue during the period of the insurance.

Event Insurance Services are underwritten by AXA Insurance UK Plc.



Example of Terms

For full terms and conditions a specimen policy is available on our website.

- > The first £250 of each and every claim
- > Loss, theft or damage from unattended venues or vehicles
- > Dangerous activities including: shooting, archery, bouncy castles, fireworks and fairground rides
- > Exhibitors, contractors or suppliers
- > Any wilful or malicious act or acts of vandalism
- > Damage to the ground and/or underground services at the venue
- > Events lasting more than 3 days, unless otherwise agreed by us

IMPORTANT

This product meets the demands and needs of those who want to protect their event/s against the specified list of contingencies.

INSURANCE IS NOT IN PLACE UNTIL A POLICY HAS BEEN ISSUED. THE INSURERS RESERVE THE RIGHT TO DECLINE ANY PROPOSAL.



insurance cover for
multiple events



Insured

Name _____
 Address _____

 Postcode _____
 Daytime Contact Telephone No. _____
 E-mail _____

Events

Events to be Insured _____

 Principle Venues (if more than 1 venue is used, please state as various) _____

 Commencing Date of Cover _____ / _____ / _____

Are you the event organiser 3rd party eg. exhibitor, DJ, etc both

This insurance will only indemnify those whose gross annual turnover does not exceed £20,000. This insurance does not cover professional event organisers, or business risks. Alternative policies are available for turnovers exceeding £20,000.

Gross Annual Turnover
 What is the gross annual turnover in relation to the events to be insured £ _____

Total attendance per event _____

Number of events to be insured _____

	LEVEL NO.	COVER REQUIRED	PREMIUM
Section 1 Public Liability	_____	_____	_____
Section 2 Employer's Liability	_____	_____	_____
Section 3 Event Equipment	_____	_____	_____
Total Premium			_____

1 If event equipment is to be insured please provide a breakdown and individual values

Description	Value
_____	£ _____
_____	£ _____
_____	£ _____
_____	£ _____
_____	£ _____

- | | YES | NO | N/A |
|---|--------------------------|--------------------------|--------------------------|
| 2. If the event is staged over a number of days has 24 hour security of the site been arranged? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do written contracts of hire exist between yourself and the venue? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Are any dangerous activities going to be undertaken at the event? (See example of terms overleaf) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5a. Will adequate first aid be provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5b. Will suitably qualified staff be in attendance? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Has the permission of the local authority been sought and granted? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7a. Has the advice of the police or fire authority been sought? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7b. Will either be present at the staging of the event? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8a. Will staging and seating be erected? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8b. Will this be carried out by suitably qualified professionals with their own insurance? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Whilst organising or participating in an event, have you, any official, committee member or co-organiser: | | | |
| a) Sustained any loss or damage or liability during the last 5 years, whether insured or not? | <input type="checkbox"/> | <input type="checkbox"/> | |
| b) Had any insurance declined, cancelled or had special terms imposed? | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. Have you, any official, committee member or co-organiser ever been convicted or charged, but not yet tried for an offence other than a driving offence? | <input type="checkbox"/> | <input type="checkbox"/> | |

DECLARATION

To the best of my knowledge and belief, the information provided in connection with this proposal whether in my own hand or not, is true and I have not withheld any material facts. I understand that non-disclosure or misrepresentation of a material fact will entitle Underwriters to void this insurance. (A material fact is one likely to influence acceptance or assessment of this proposal by Underwriters. If you are in any doubt as to whether a fact is material or not, please describe it on a separate attached sheet).

I understand that the signing of this proposal does not bind me to complete the insurance but agree that, should a contract of insurance be concluded, this proposal and statements made therein, shall form the basis of the contract.

Signature of Proposer _____ Date _____

section 1 - compulsory

Premiums - Up to 15 Events per Year (3 days per event)

LEVEL	TOTAL VISITORS	£1M	£2M	£5M
1	Up to 250	£150.00	£200.00	£250.00
2	Up to 500	£250.00	£350.00	£450.00
3	Up to 1,000	£350.00	£450.00	£550.00

Premiums - Up to 45 Events per Year (3 days per event)

LEVEL	TOTAL VISITORS	£1M	£2M	£5M
4	Up to 250	£300.00	£350.00	£400.00
5	Up to 500	£400.00	£500.00	£600.00
6	Up to 1,000	£500.00	£600.00	£700.00

section 2 - optional

Employer's Liability – £5,000,000

Up to 10 volunteers / helpers / employees at any one time

Premium - £199.00

section 3 - optional

Event Equipment 3 consecutive days only. Maximum single item value £2,000. Items in excess of £2000 are subject to a £500 policy excess. Maximum sum insurable for laptops & computers £500.

LEVEL	COVER UP TO	PREMIUM
1	£2,500	£80.00
2	£5,000	£125.00
3	£10,000	£250.00

All sections are extendable by individual quotation.

Under insuring your events in respect of attendance, sums insured or period of cover will jeopardise the cover provided in the event of a claim.