

Insured

Name _____
 Address _____

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

Event to be Insured

Name of Event _____
 Cover Required _____ From _____ To _____
 Dates open to the public _____ From _____ To _____
 Venue _____
 Address _____

 _____ Postcode: _____

Type of Event

Please state the type of event you are organising and the activities that you will be arranging at the event.

Total number of visitors expected to attend your event, on any one day.

Total number of visitors expected to attend your event, over its duration.

	LEVEL NO.	COVER REQUIRED	PREMIUM
Section 1 Public Liability	<input type="text"/>	<input type="text"/>	<input type="text"/>
Section 2 Employer's Liability	<input type="text"/>	<input type="text"/>	<input type="text"/>
Section 3 Event Equipment	<input type="text"/>	<input type="text"/>	<input type="text"/>
Section 4 Cancellation	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Premium			<input type="text"/>

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

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

- | | YES | NO | N/A |
|---|--------------------------|--------------------------|--------------------------|
| 2. Are you the organiser of this event? | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. 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"/> |
| 4. Do written contracts of hire exist between yourself and the venue? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. 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"/> |
| 6a. Will adequate first aid be provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6b. Will suitably qualified staff be in attendance? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Has the permission of the local authority been sought and granted? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8a. Has the advice of the police or fire authority been sought? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8b. Will either be present at the staging of the event? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9a. Will staging and seating be erected? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9b. Will this be carried out by suitably qualified professionals with their own insurance? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. 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"/> | |
| 11. 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

Public Liability up to £5,000,000

4 consecutive days only - 'Total Visitors' are calculated on the maximum number of persons attending throughout the entire duration of the event. Therefore 300 visitors per day over a 3 day event equals 900 total visitors.

LEVEL	TOTAL VISITORS	£1M	£2M	£5M
1	Up to 100	£55.00	£80.00	£110.00
2	Up to 250	£75.00	£110.00	£150.00
3	Up to 500	£100.00	£150.00	£200.00
4	Up to 1,000	£150.00	£200.00	£250.00
5	Up to 2,500	£250.00	£300.00	£350.00
6	Up to 5,000	£350.00	£400.00	£450.00
7	Up to 10,000	£500.00	£550.00	£600.00

section 2 - optional

Employer's Liability – £5,000,000

4 consecutive days only.

Up to 20 volunteers / helpers / employees at any one time - £100.00

section 3 - optional

Event Equipment 4 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	EQUIPMENT COVER UP TO	PREMIUM
1	£5,000	£50.00
2	£10,000	£125.00
3	£20,000	£250.00
4	£30,000	£365.00
5	£40,000	£400.00
6	£50,000	£600.00

section 4 - optional

Cancellation, abandonment and postponement cover

LEVEL	CANCELLATION COVER UP TO	PREMIUM
1	£5,000	£75.00
2	£10,000	£150.00
3	£20,000	£250.00
4	£30,000	£375.00
5	£40,000	£500.00
6	£50,000	£625.00

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.