WORLD EVENTS INSURANCE
SPORTS | LEISURE | ENTERTAINMENT

Short Term Private Events
Insurance Program

PROGRAM DESCRIPTION

This insurance program has been designed for organizers of short term special events that meet the following criteria:

- Total attendance is 1,000 or less
- Maximum number of consecutive event days is 5 (not including set-up or tear down)
- Event is held at a single location
- Event must take place in the United States

Coverage is provided by a carrier rated A+ (Superior) by A.M. Best Company.

INELIGBLE OPERATIONS

The following event operations are not eligible for this program, but may be in our other programs. Please note, this is not a complete listing of ineligible operations.

- Athletic events and competitions
- Cinematography and photography for commercial use
- Concerts – involving rock, rap or hip-hop
- Events held on an airport premises
- Gun and/or knife shows
- Haunted attractions
- Historical battle reenactments
- In or on water activities
- Mazes (corn, hay or fence)
- Motorized vehicle, motorcycle, watercraft or powerboat practicing for, qualifying for or testing for any racing speed, demolition or stunt activity
- Overnight retreats
- Rodeos (any rodeo activity including, but not limited to, bronco or bull riding, steer roping, team roping, barrel racing or horseback riding)

This brochure is for illustrative purposes only, and is not a contract of insurance. You must refer to the actual policy for complete information regarding coverage terms, conditions and exclusions as they may change from one coverage period to the next. You may request a copy of the full policy by submitting a written request to World Events Insurance.

ELIGBLE OPERATIONS

The following event operations are eligible for this program. Please note, this is not a complete listing. If you do not see your event operation listed, please contact World Events for eligibility.

- Birthdays
- Achievement Celebration
- Anniversary Party
- Awards Banquets (private)
- Baby Shower
- Baptism
- Bar/Bat Mitzvah
- Club Meeting
- Christening
- Debutante Ball
- Conventions
- Debuts or debutante balls
- Dinners, luncheons (private)
- Engagement Party
- Graduation Party
- Holiday Party (private)
- House Warming
- Memorial Service
- Quinceanera
- Dance Recital
- Music Recital
- Retirement Party
- Reunion
- Quinceañera
- Recitals
- Religious assemblies
- Sweet Sixteen
- Wedding Shower

FOUR EASY WAYS TO ENROLL FOR COVERAGE

WEB **www.worldeventsinsurance.com**

MAIL World Events Insurance
501 W. Weber Ave Ste 100E
Stockton, CA 95203

FAX 1-209-888-5094

E-MAIL info@worldeventsinsurance.com

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Enrollment Form - Short Term Private Events

Completion of this enrollment form confirms your desire to obtain insurance through WORLD EVENTS INSURANCE. The submission of this enrollment form and/or acceptance of payment does not guarantee coverage. Certain operations are not eligible for coverage by this program. WORLD EVENTS INSURANCE reserves the right to decline any request for coverage.

CLIENT INFORMATION:

NAMED INSURED		
ADDRESS		
CITY	STATE	ZIP

CONTACT INFORMATION:

FIRST NAME	LAST NAME
PHONE	ALTERNATIVE PHONE
FAX	EMAIL ADDRESS

EVENT DETAILS:

EVENT NAME	EVENT WEBSITE	
EVENT VENUE NAME		
VENUE ADDRESS		
CITY	STATE	ZIP
EVENT START DATE	EVENT END DATE	IS EVENT OUTDOORS? Y N
TYPE OF EVENT		
DESCRIBE EVENT		
MAXIMUM DAILY ATTENDANCE	TOTAL ATTENDANCE	

TYPE OF MUSICAL ENTERTAINMENT

NAME OF BANDS OR PERFORMERS
TYPE OF MUSIC

SUPPLEMENTAL LIQUOR LIABILITY

Please note, if Insured is not either serving or selling the liquor, additional liquor coverage is not required.

WILL ALCOHOL BE SERVED BY A LICENSED BARTENDER? Y N
IF NO, WHO WILL BE SERVING THE ALCOHOL?
DESCRIBE TRAINING AND/OR EXPERIENCE OF PERSON(S) SERVING ALCOHOL:
AVERAGE AGE OF ATTENDEES?
WHAT MEASURES ARE BEING TAKEN TO PREVENT SERVICE TO MINORS?
DOES THE APPLICANT HAVE A VALID LIQUOR LICENSE? Y N
WILL THERE BE AN OPEN BAR? Y N

SUPPLEMENTAL INLAND MARINE

Please note, if Insured is not either covering equipment or private property, Inland Marine coverage is not required.

WHAT TYPE OF PROPERTY DO YOU NEED COVERAGE FOR?
WHAT IS THE VALUE OF THE PROPERTY? $
WILL THE PROPERTY BE STORED OVERNIGHT?
IS THE INSURED RESPONSIBLE FOR TRANSPORTING THE PROPERTY? Y N
IF YES, PLEASE DESCRIBE HOW IT IS BEING TRANSPORTED:

CERTIFICATE REQUESTS #1

COMPLETE THIS SECTION TO REQUEST ADDITIONAL CERTIFICATES. PROVIDE SEPARATE REQUESTS FOR EACH ADDITIONAL CERTIFICATE NEEDED.
INDICATE TYPE OF CERTIFICATE THAT YOU ARE REQUESTING: ☐ ADDITIONAL INSURED ☐ EVIDENCE OF COVERAGE
CERTIFICATE HOLDER/ENTITY NAME:
MAILING ADDRESS:
CITY: STATE: ZIP:
RELATIONAHIP TO YOU: ☐ OWNER/LESSOR OF PREMISES ☐ SPONSOR ☐ CO-PROMOTER
SPECIAL CERTIFICATE LANGUATE NEEDED (please explain or attach information):

PREMIUMS:

# of Guests	Limits of Liability		
	$1,000,000 / $2,000,000	$1,000,000 / $5,000,000	$2,000,000 / $3,000,000
1-100	$170.00	$220.00	$270.00
101-200	$195.00	$245.00	$295.00
201-350	$205.00	$260.00	$310.00
351-500	$210.75	$275.75	$325.75
501-750	$250.00	$351.00	$401.00

Credit Card Charge - **$** 10.00

Total Premium - $_____

PREMIUMS ARE 100% FULLY EARNED AND NON-REFUNDABLE (PLEASE CHOOSE ONE OF THE FOLLOWING OPTIONS)

☐ ENCLOSED IS MY CHECK FOR THE TOTAL PREMIUM		
☐ PLEASE CHARGE MY: ☐ VISA ☐ MASTERCARD ☐ DISCOVER ☐ AMEX		
NAME ON CARD:		
BILLING ADDRESS:		
CITY:	STATE:	ZIP:
CARD #:	EXP DATE (mm/yyyy):	
SECURITY CODE:		

ACKNOWLEDGEMENTS AND SIGNATURES

I understand that the insurance company, in determining whether to provide insurance coverage, will rely on the information contained in this form and all other information being submitted. I hereby warrant, represent and confirm that, to the best of my knowledge, all information provided is complete, true and correct. World Events Insurance receives compensation from the insurance company in consideration for its performance of insurance services that include, but are not limited to; selling of policy. The insurance company compensates World Events Insurance based on a predetermined calculation of ten percent of the total premium.

I understand that, subject to applicable laws, World Events Insurance will invest the premium and, in accordance with the permission of the insurer, will receive any interest or other income that the premium generates prior to remittance to the insurer. I am aware that the insurance company expects accurate reporting for my premium calculation. I understand that my books and records may be examined or audited by the insurance company at any time during the coverage period and up to three years thereafter. Intentional misrepresentation or misreporting may jeopardize coverage.

I further acknowledge that I have reviewed all information provided with this enrollment form and understand the exclusions which apply, as well as the activities and operations for which coverage is not provided.

Applicant signature _____ Date: _____

Printed name: _____ Title: _____

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