

Westpoint Insurance Group

Program Overview

In today's fast paced society, accidents can happen anytime, anywhere while traveling with a business group, vacationing with friends and family or while attending the local town fair. Our special event accident and liability insurance programs are specifically designed to help eliminate the financial burden one incurs as a result of costly medical bills or civil litigation.

Westpoint Insurance can tailor make accident and/or liability policies for a variety of "special events".

- Marathons
- Beauty Contests
- Picnics
- Educational Exhibitions
- Flower Shows
- Auctions
- Banquets
- Proms
- Bazaars
- Cave Exploration
- Meets
- Soap Box Derbies
- Fairs
- Fishing Derbies
- Trade Shows
- Luncheons
- Fashions Shows
- Consumer Shows
- Concerts
- Tractor Pulls
- Contests
- 4-H Clubs
- Zoo Outings
- Garden Shows
- Graduations
- Telethons
- Antique Shows
- Fraternals
- Parades

"Special Events" require specialized coverages put together by a firm that has a certain expertise. The expertise of Westpoint Insurance Group is based on information carefully gathered through decades of experience. No matter how "risky" an activity may seem, an insured can feel confident that the coverage is crafted carefully and expertly to serve their needs.

The General Liability Plan

Who is covered?

This program provides protection for the Policyholder against claims of bodily injury liability, property damage liability, personal and advertising injury liability and the litigation costs to defend against such claims. Coverage is provided up to \$1,000,000.00 per occurrence. There is no deductible amount.

Coverage includes suits arising out of:

- Injury or death of spectators
- Injury or death of volunteers
- Property damage liability
- Host liquor liability (non-profit)
- Incidental medical malpractice
- All activities necessary to conduct of practices and games
- Ownership use or maintenance of fields or practice areas
- General negligence claims
- Cost of investigation and defense of claims, even if groundless
- Corporal punishment
- Optional non-owned automobile liability

Program Limits

- Occurrence Form Policy
- \$2,000,000.00 General Aggregate
- \$1,000,000.00 Each Occurrence
- \$1,000,000.00 Products / Completed Operations
- \$1,000,000.00 Personal & Advertising Injury
- \$300,000.00 Fire Damage
- Optional \$1,000,000.00 Non-Owned Automobile Admitted Basis

Exclusions

Claims made by athletic participants, abuse or molestation, aircraft, all acts of terrorism, asbestos liability, assault and battery, collapse of temporary structure, employment related practices, fungi and bacteria, hepatitis, HIV, HTVL, AIDS, transmissible spongiform encephalopathy, lead poisoning, nuclear energy liability, professional liability, pyrotechnics activity, total pollution, war liability and liability for occurrences prior to the effective date of coverage. All of the above are subject to the terms and conditions of the policy.

Note: There is no liability coverage for claims arising out of any of the following activities: All motor sports, ballooning, bungee jumping, cheerleading pyramids, gymnastics, inflatables, luge, mountain climbing, parachuting, polo, rock climbing, rodeo or any equestrian related sports, sale/manufacture or distribution of any athletic equipment, skin diving, SCUBA diving, snow skiing, squash, tobogganing, use of saunas or other tanning devices, use of trampolines, water slides, white water rafting or any saddle animal exposures.

The optional hired and non-owned automobile liability coverage is not available in Illinois, Louisiana or Vermont.

Special Events

General Liability Insurance Program



A General Liability Insurance Program Providing Protection from Lawsuits of Bodily Injury and/or Property Damage

Representative:

Westpoint Insurance Group

P.O. Box 1495
Bridgeview, IL 60455
(800) 318-7709

Fax: (708) 636-3915

E-mail: sales@westpointinsurance.com
www.westpointinsurance.com

Special Event Liability Insurance Request for Quotation*

Please complete the following application. Once the application is received, a quotation will be sent within one business day. As special events vary, some questions may not be applicable. Please indicate "N/A" where necessary.

Please note that we are unable to provide coverage for the following events: Air Shows, Ballooning Events, Skydiving Events, War Games, Cattle Drives, Abortion Rights Rallies, Pro Choice Rallies, Protest Events, Dunk Tanks, Trampolines, Moonwalks, Water Slides, Auto Racing, Motorcycle Racing, Snowmobile Racing, Demolition Derbies, Hot Air Balloons, Bungee Jumping and Concerts with a Propensity Towards Violence (rap, punk rock, etc).

***Quotes for this type of coverage involve lengthy underwriting consideration. Please allow enough time before your event to receive a competitive quote. Recommendation is at least two (2) weeks before the event, or before Proof of Coverage is required. Additional information may be requested during the underwriting process. Not all questions are going to apply to your event. If question is not applicable, reply with a "0" or N/A. All questions require an answer and application needs to be completed in its entirety.**

Name of Applicant (Last, MI, First)

Mail Address of Applicant

City State Zip

Phone Cell

Do you wish to receive your quotation by: Fax E-mail

E-mail Fax

Dates of Event Times

Name of Event

Name of Facility

Address of Facility

Does the facility carry liability insurance? Yes No

Description of Event:

Is this Event Located Indoors or Outdoors?

Indoors Outdoors

If Outdoors, Is the Area Fenced or Enclosed? Yes No

Are you Responsible for Parking? Yes No

If Yes, Square Footage of Parking Area?

What is the Seating Capacity of the Event?

What is the Estimated Attendance Per Day?

What is the Number of Tickets Printed?

What is the Number of Tickets Sold to Date?

What is the Price of Admission?

What is the Estimated Gross Receipts?

What is the Estimated Total Payroll?

What are the Limits of Liability Requested?

General Aggregate Products Aggregate

Each Occurrence Personal/Adv Injury

Fire Damage Medical Payments

Name, Address and Relationship of all Additional Insureds to be Added to the Policy:

Name

Address

City State Zip

Name

Address

City State Zip

Will there be any Exhibitions, Demonstrations, Parades or Pageants? Yes No

If Yes, Please Describe

Are Seats of Temporary or Permanent Construction?

Temporary Permanent

Is Seating Reserved or General Admission? Yes No

Describe Type of Seating Provided (Bleachers, Folding Chairs, etc.)

If the Event is Outdoors, Does the Event End Ninety Minutes Prior to Sundown? Yes No

If No, Is there Permanent Lighting over all Spectator Areas and Parking Lots? Yes No

If a Stage is Involved, is the Stage of Temporary or Permanent Construction? Temporary Permanent

If Temporary, Who is Responsible For Set up of Stage?

If Other than the Applicant, is a Certificate of Insurance Provided? Yes No

If Other than the Applicant, is Applicant Named as Additional Insured? Yes No

Is Temporary Lighting Involved? Yes No

If Yes, Who is Responsible for Hook Up of Lighting?

If Other than the Applicant, is a Certificate of Insurance Provided? Yes No

If Other than the Applicant, is Applicant Named as Additional Insured? Yes No

Is a Tent Involved? Yes No

If Yes, Who is Responsible for the Set Up of the Tent?

If Other than the Applicant, is a Certificate of Insurance Provided? Yes No

If Other than the Applicant, is Applicant Named as Additional Insured? Yes No

Special Event Liability Insurance Request for Quotation* Cont.

Are Ushers Used for Seating Purposes? Yes No

If Yes, Who is Providing the Ushers?

If Other than the Applicant, is a Certificate of Insurance Provided?

Yes No

If Other than the Applicant, is Applicant Named as Additional Insured? Yes No

What is the Number of Vendors or Trade Booths?

What Goods are to be Displayed?

Are all Goods Finished Products or Demonstrations?

Finished Products Demonstrations

Are there any Cooking Demonstrations? Yes No

Are Vendors or Trade Booths Required to Provide a Certificate of Insurance? Yes No

How is Advertising Being Used at the Event?

Who is Providing the Food and/or Drink?

If Other than the Applicant, is a Certificate of Insurance Provided?

Yes No

If Other than the Applicant, is Applicant Named as Additional Insured? Yes No

Is Liquor to be Sold at this Event? Yes No

If Yes, is there a Liquor Liability Policy In-Force? Yes No

If Yes, Complete the following Questions if you would like a Quotation for Optional Liquor Liability Coverage.

Estimated # of attendees consuming alcohol daily?

Is Applicant the Sole Vendor of Alcohol at the Event?

Yes No

a. If No, Please List # of Vendors Serving Alcohol

b. Are all Participating Alcohol Vendors Required to Carry Minimum Liquor Liability Limits for this Event?

Yes No

Will Alcohol be Dispensed by a Professional Bartender?

Yes No

a. If No, How and By Whom Alcohol will be dispensed?

b. Describe Training and/or Experience of Persons Serving Alcohol

c. What Measures are in Place to Prevent Service of Alcohol to Minors and/or Intoxicated Persons?

Is Liquor License Required for this Event? Yes No

Does Application have a Valid Liquor License? Yes No

Number of Bars or Areas at which Alcohol will be Dispensed at this Event:

a. Is Alcohol Consumption Confined to this (these) Areas? Yes No

b. If No, Please Describe

c. Will there be an Open Bar? Yes No

d. Will Alcohol be Sold by the Drink? Yes No

e. Cost per drink?

f. Is BYOB Permitted? Yes No

Will Food be Sold or Served with the Alcohol? Yes No

If Yes, Describe Food Available

Estimated Gross Receipts per Day

Alcohol Food

Total Estimated Gross Receipts for Event

Alcohol Food

Has the Applicant Received any Fines or Citations in the Last 5 Years? Yes No

If Yes, Please Describe

Is the Applicant named as an additional insured?

Yes No

Has the Applicant had a Liquor Loss in the Last 5 Years?

Yes No

If Yes, Please Describe

Special Events

Special Event Liability Insurance Request for Quotation* Cont.

Are there Cooking Facilities on the Premises? Yes No

If Yes, What type of Fire Protection is Present?

Is the Applicant Providing any Overnight Accommodations such as Camping? Yes No

If Yes, Please Describe

Who is Responsible for Providing Security?

If Other than the Applicant, is a Certificate of Insurance Provided? Yes No

If Other than the Applicant, is Applicant Named as Additional Insured? Yes No

Is the Security Provided Armed or Unarmed? Armed Unarmed

If the Event is being held on a Street or Other Public Place of Vehicular Access, what Protection is being Used between the Street and the Sidewalk?

If Yes, How many Units will there be? (each float, band or car is a unit)

Will Anything be Thrown from the Units? Yes No

If Yes, What will be Thrown from the Units?

What is the Length of the Parade in Blocks?

Length of Time

What is the Estimated Number of Spectators?

Are Fireworks or Pyrotechnics to be Used? Yes No

If yes, please describe.

Is the Applicant Signing any Hold Harmless Agreements? Yes No

Yes No

If Yes, with Whom and What Responsibilities?

(Please Attach Samples of all Hold Harmless Agreements)

Is the Applicant being Held Harmless by Others? Yes No

If yes, by whom and what responsibilities?

(Please Attach a Copy of the Agreement if Available)

Has this Event been held in the past by the Applicant? Yes No

Yes No

If yes, for how many years?

Please Attached the Premium and Loss Experience For the Past 5 Years.

Please Describe any Losses over \$5,000.00

Has your Prior Insurance Ever Been Cancelled? Yes No

Has your Prior Insurance Ever Refused to Renew? Yes No

Do you have a Risk Management Plan? Yes No

Please Attach All Lease and Hold Harmless Agreements, Brochures of the Event and a Diagram of Location(s) to be Used.

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly provides false information in an application for insurance may be guilty of a crime and may be subject to civil fines and criminal penalties.

I certify that the above information is true and coverage is not applicable until accepted by the Insurance Company.

Name of Applicant

Signature of Applicant

Date

Please email, fax or mail your completed application to:

Westpoint Insurance Group

5625 W. 79th Street

Burbank, IL 60459

Questions or Need Assistance?

Phone: (800) 318-7709

Fax: (708) 636-3915

E-mail: sales@westpointinsurance.com

Website: www.westpointinsurance.com

Not available in all states.

Special Events