



| Special Events Supplement | | | | | |
|---------------------------|------|--------------------------|-------------------------|----------------------|------------------------|
| Named Insured | | | | | |
| Type of Event | Date | Admission Fee Per Person | Estimated Gross Revenue | Estimated Attendance | Estimated Liquor Sales |
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| Who is promoting the event | | | |
| Is the type of event professional or amateur | | <input type="checkbox"/> Professional | <input type="checkbox"/> Amateur |
| Is this event being operated by a third party vendor | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will third party vendor name the insured as an additional insured & provide a certificate of insurance | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will a waiver of subrogation be provided | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the agreement provide a hold harmless clause in favor of the insured | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Any events held outdoors | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Bleacher seating for any events | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Liquor at any events | <input type="text"/> | Revenue | <input type="text"/> |
| Any outside vendors on-site | <input type="text"/> | Revenue | <input type="text"/> |
| Medical/Security personnel provided (<i>If yes, please advise how many of each professionals</i>) | | | |
| Paramedics | <input type="text"/> | EMT | <input type="text"/> |
| Nurses | <input type="text"/> | Security | <input type="text"/> |
| Describe measures taken for crowd control and emergency services | | | |
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| <p>The following events are excluded from the policy: Boxing, Caged Boxing, Ultimate Fighting, Wrestling Events, Horse Racing, Fireworks, Mixed Martial Arts, Heavy Metal Concerts, Concerts with Mosh pits*. *Coverage for these events can be provided, but will require additional information.</p> | | | |