

## NOMINEE EVENT APPLICATION

Please e-mail the completed application to Mark Wendling (<u>Mwendling@mvrma.com</u>) and Sandy Caudill (<u>scaudill@mvrma.com</u>) at least 10 days in advance of the event.

MEMBER INFORMATION		
Member Name:		
Contact:		
Phone Number:	Fax Number:	
Email Address:		
EVENT INFORMATION		
Name/Type of Event:		
Description of Event:		
Date(s):	Hour(s):	
Location:		
Attendance (per day):	Ages of Attendees:	
Participants (per day)	Ages of Participants: Waivers Signed? Yes No	
Are Fireworks Included? Are they providing their own insurance?	Carnival Rides?	
Bands?	How Many?	
Names*:		
Type of Music?		
*if more than one please attach a separate page		



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ADDITIONAL INFORMATION
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Additional Insureds:		
Joint Sponsor(s):		
Number of Exhibitors Requiring Coverage (No Sales)*:		
Number of Concessionaires Requiring Coverage (Non Food Sales)*:		
Number of Concessionaires Requiring Coverage (Food Sales)*:		
*Please provide separate list of concessionaires / exhibitors to be covered		
Liquor Liability Needed?		
Are the securities in place to avoid overindulge and underage drinking? Yes	No	
Are identifications checked and wristbands issued? Yes No		
Is the liquor confirmed to a set area? Yes No		
Increased Limit Options:		
\$1,000,000/\$3,000,000 Total Event premium will be increased by 11%		
\$2,000,000/\$2,000,000 Total Event premium will be increased by 19%		
Property Damage :		
\$50,000 Limit Premium \$54.00		
\$100,000 Limit Premium \$108.00		
\$300,000 Limit Premium \$256.00		



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COMPANY USE ONLY:	
Hazard Group:	Attendance Premium:
Exhibitors Premium:	Concessionaires Premium:
Liquor Liability Premium:	Additional Insureds Premium:
Property Damage Premium:	Increase Limits Premium:
	TOTAL PREMIUM: