Application for Special Events Coverage

(Liquoi Sales)				
Archdiocese/Diocese of:	Date of Event: _	Date of Event:		
Name of Parish: School, or Agency:		Type of Event (Example: Wedding Reception Anniversary Party, Etc Please Specify):		
Street Address:	Anniversary Party, E	tc Please Specify):		
City, State, Zip Code:				
Phone:	Time of Event:	From:	To:	
Contact Person: (printed name)	Approximate Nu	mber of Participants:		
Lessee (Additional Insured) Information:	Will there he Lia	uor at the event?		
Name of Sponsoring Organization and/or	will there be ciq	Yes	No	
Individual Requesting Coverage:		162	INU	
Email:		Is Liquor being sold, included in the price of admission, or provided at a fundraiser?		
		Yes	No	
Street Address:				
City, State, Zip Code:	If yes, a separate,	additional Liquor Liability p	oolicy is required.	
	Is Food Being So	erved? Yes	No	
Telephone:				
Lessee Signature	Overnight Event	? Yes	No	
The Special Events coverage provides \$1,000,000 Co Liability coverage per event (not per claim).	mbined Single Limit Bodily Injury, Pro	pperty Damage, and Hos	t Liquor	
	it not limited to:			
Coverage does not apply to certain events such as, bu - Amusement rides, mechanically operated devices, tr - Events where a fee or admission is charged, unless	rampolines, & rebounding devices			
- Events organized or operated by professional promo				
- Events with attendance of more than 1,000 persons	For Company Us	se only:		
- Sporting events including tournaments & camps				
- Events which exceed 72 hours in duration				
- Events involving pool or lake activities				
- Events involving recreational vehicles				
- Fireworks & fireworks displays				
- Liquor Liability (Dram Shop) coverage				

NOTIFICATION OF AN EVENT MUST REACH ARTHUR J. GALLAGHER AT LEAST 15 DAYS IN ADVANCE OF THE EVENT

ALL EVENTS NEED PRIOR APPROVAL BY K & K Insurance Group, Inc.

COMPLETE AND RETURN THIS FORM TO:

- Any Carnival Event

Once the application is reviewed and approved

an invoice will be sent out:

Brianna Riske Phone:

(630) 285-4252 Fax: (630)285-4062

Please do not send cash or checks

Brianna Riske@ajg.com

Please report all claims to K & K Insurance Group, Inc. Claims department at 1-800-237-2917

All Events must be reported 15 days prior to effective date.