

Please answer **ALL** questions completely.

Should any question or part thereof not be applicable, please state "N/A".

Should insufficient space be provided, please continue on your company letterhead.

The prospective insured must be a legal entity, not an individual, registered and domiciled in South Africa.

1. Company to be Insured _____
2. Physical address _____
_____ Post code _____
3. VAT number _____
4. Company Reg Number _____
5. Company Website _____
6. Is the insured the event organizer? Yes No
7. If not, what is the insured's function at the event?

Event Details

1. Name of event _____
2. a. Description of the event

b. List of activities happening at event

c. Has the event been held before?

3. Date of actual event _____ to _____
- From _____
4. Date coverage requested – from _____ 12:01 am to _____ 12:01 am
5. Name and location of event venue _____
6. Does the venue carry Liability Insurance? Yes No
7. Is this event indoors or outdoors? Indoors Outdoors
8. If the event is outdoors, is the area fenced in or otherwise enclosed? Yes No
9. Venue capacity _____
10. Estimated attendance per day (guests or spectators) _____
11. If it is a sporting event, what is the estimated number of participants per day? _____



12. Will there be any exhibitions, demonstrations or parades? Yes No

If Yes, please give details

13. Are seats temporary or permanent construction? Temporary Permanent

14. Is seating Reserved or General Admission? Reserved General

15. Describe type of seating provided (bleacher, stadium, grandstand, theatre, folding chairs, etc.)

16. If stage is involved, is it permanent or temporary stage? Temporary Permanent

17. If temporary, who is responsible for set up (Applicant or other name)?

18. If other than the applicant, do they have Liability Insurance? Yes No

19. If a tent is involved, who is responsible for set up (Applicant or other name)?

20. Do they have Liability Insurance? Yes No

21. Is temporary lighting involved? Yes No

22. Who is responsible for hook-up (Applicant or other name)?

23. If other than the applicant, do they have Liability Insurance? Yes No

24. In the region where the event is being staged are there any dams, lakes, rivers or swimming pools? Yes No

25. Are any of the events water or aviation related? Yes No

If Yes, please give details

26. Are any of the events potentially dangerous, e.g. paintball/ skydiving/motor racing/pyrotechnics/ fairground rides/animal rides/shooting/archery? Yes No

If Yes, please give details

27. Do the participants sign an indemnity form? Yes No

If Yes, please send us the indemnity form with the completed proposal form

28. In the area in which the event is being held, are there issues which could lead to the disruption of the event, such as socio-economic strife, political, ethical, religious or other tension? Yes No

If Yes, please give details



Limit of Indemnity

The Extensions below are added at no extra cost at the following limits. Should you require higher limits there will be additional premium. The included limit may be subject to change at any time.

Claims Preparation Costs	R500 000
Collapse of Temporary Construction and Scaffolding	R1 000 000
Damage to Leased or Rented Premises	R1 000 000
Emergency Medical Expenses	R500 000
Statutory Legal Defence Cost	R500 000
Wrongful Arrest and Defamation	R500 000

please indicate the value of the Limit Of Indemnity you require. E.g R1 000 000 for Option 1 and R5 000 000 for Option 2.

The minimum quoted limit is R1 000 000

	Option 1	Option 2	Option 3
Public Liability			
Products Liability/Defective Workmanship			
Employers Liability			
Wrongful Arrest and Defamation			
Damage to leased or rented premises (the venue)			
Statutory Legal Defence Costs			
Emergency Medical Expenses			
Claims Preparation Costs			
Collapse of Temporary Construction and Scaffolding			

Privacy

In order to provide you with insurance, we have to process your personal information. We will share your personal information with other insurers, industry bodies, credit agencies and service providers. This includes information about your insurance, claims and premium payments. We do this to provide insurances services, prevent fraud, assess claims and conduct surveys. We will treat your personal information with caution and have put reasonable security measures in place to protect it. BY signing this application for insurance, you agree to the processing and sharing of your personal information.

Declaration

I/We, the undersigned, declare that the statements set forth in this proposal form together with any other information supplied are true and correct and that I/we have not misstated or suppressed any material facts.

I/We agree that this proposal form together with any other information supplied by me/us shall form the basis upon which the contract of insurance is concluded and shall be incorporated therein.

I/We further undertake that in the event that the information provided changes between the date of this application and inception of cover, I/We will notify ITOO of such changes as soon as reasonably possible.

Name (duly authorised)

Designation

Signature

Date

Y	Y	Y	Y	M	M	D	D
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