

**Sports Tournaments & Events Program**

Policyholder State E-mail Address:

 

Have you had more than $5,000 of total claims in the last three years?

Yes No

Do you have a system for securing waivers for all participants (adult or minor)?

Yes No

Does your event include any of the following activities  
     - Overnight accommodations or camping facilities  
     - Amusement rides, mechanical devices, rock climbing walls or inflatables  
     - Events involving animals other than service animals  
     - Serving, sale or distribution of any alcoholic beverages  
     - Motorsports events (including demolition derbies, mud bogs, tractor pulls, races and stunt shows)  
     - Fireworks/pyrotechnics  
     - Professional sports try-out, or training camp  
     - College or university championship event

Yes No

Estimated Total Spectator Attendance (all days combined)



Event Start Date\* Event End Date

 

\*Additional premium may be required to meet minimum premium requirements.  
See "Quotation Information" box above for final premium totals.  
Please enter each sport you will have at your event along with the associated number of participants.

**Sport**   **Number of Participants**

**(include coaches & officials)**

  

 

 

 

 

Would you like to add Accident Medical Coverage to your policy?

Yes No

Would you like to increase your Accident Medical limit from $25,000 to $100,000?

Yes No

**Policy Information**

Policyholder Name



Policyholder Address Policyholder City Policyholder State Policyholder Zip

   

Contact Name E-mail Address

 

Event Start Time Event End Time Contact Phone Number

  

Event Name Event Venue

 

Event Address Event City State Zip

   

Estimated attendance per day



Number of years this event has taken place Age Range of Participants

 

Website (if applicable)



Description of event and any ancillary activities





Fraud Notice



Please check this box to confirm that you have read and agree to our fraud notice.

Compensation Disclosure



Please check this box to confirm that you have read our compensation disclosure.

Purchasing Group Agreement



Please check this box to confirm that you have read our purchasing group agreement.