

## **SRIM Airmeet Liability Form**

Name: \_\_\_\_\_

Airmeet/Balloon E	Event	O Fly-In	O Static Display			
Name Insured: (Exa	Name Insured: (Exact name of organization to be insured (principal sponsor))					
Mailing Address:						
Name of Event:						
Name and location	of airport and/or fac	ilities being used:				
Dates of Event:						
From:		To:				
Any night shows?						
Alternate/Rain Date	es:					
Additional Dates for teardown. Arrivals,	2		will be no public attendance:	(practice days, set-up,		
Additional Insureds: List those persons or organizations, which have requested to be named on your policy. You must indicate their relationship to the event.						
Name:			Relationship:			

Relationship: \_\_\_\_\_

Name:	Relationship:	
Name:	Relationship:	
Estimated total attendants for ALL dates listed:		
Total attendants for last year's event(s):		
Describe planned crowd control:		
Will horses be in crowd control?	Provide Number:	
Medical Payments Coverage?		
\$2,500 per person/\$10,000 per accident		
5,000 per person/\$30,000 per accident		
Personal/Advertising Injury?		
List all Performers (civilian and military page 2	articipating in your event):	
Name:	Name:	
Have you obtained a certificate of insura	ice from each participating performer?	
Are you named as an Additional Insured		

It is important that you obtain a Certificate of Insurance from each participating performer.

Will you have any Jet Powered Vehicles, Monster Trucks, or other vehicle acts?					
Have you obtained a Certificate of Insurance from each performer?					
Are you named as an Additional Insured on their coverage?					
Will there be any Balloons at your event?  How many:					
Will you have any Grandstands or Bleachers?					
List dimensions and seating capacity:					
Collapsible?					
Have you obtained a Certificate of Insurance from your Bleacher Contractor?					
Are you named as an Additional Insured on their coverage?					
Will you sell Food Beverages or Souvenirs at your event?					
Are products sold:					
If sold by Local Civic Groups or independent contractors have you obtained a Certificate of Insurance for each group / contractor?					
Are you named as an Additional Insured on their coverage?					
Will alcoholic beverages be SOLD at you event?					
In what name is the liquor license held?					
Do you want Host Liquor Liability coverage on this policy?					
Do you want Liquor Legal Liability coverage on this policy?					

If Liquor is not sold by you, have you obtained a Certificate of Insurance?					
Are you named as an Additional Insured on their cove					
Will there be air races?					
Please describe:					
Will any fireworks or explosives be used?					
Please describe:					
Name and License Number of Pyrotechnic Contractor to be used:					
Have you obtained a Certificate of Insurance from your Pyrotechnic Contractor?					
Are you named as an Additional Insured on their coverage?					
Do you want Explosives Liability coverage on this policy?					
Will there be any Non-Owned Vehicles used strictly <b>ON AIRMEET PREMISES</b> (i.e. crowd control/ security)?					
Please describe your Non-Ownership Vehicle exposure:					
TYPE	HOW MANY	USE			
Private Passenger Vehicles, Trucks or Vans					
Buses, Other (Describe)					

Do you want Limited Vehicle Non-Ownership Liability for these vehicles?					
Do you need coverage for your Courtesy/Rental vehicles? (Automobiles taken off airport premises) <b>Use separate application.</b>					
Do you need coverage for Rented or Leased Property/Equipment? Use Separate application.					
Do you need coverage physical damage to Non-Owned Aircraft while in your care, custody or control?					
How many years have y	ou held this event?				
Have there been any accidents at your previous events? Please describe on a separate sheet.					
Will there be any Non-A	Will there be any Non-Aviation Activities? Please describe on a seperate sheet.				
Coverages and Limits of Liability The following coverage's and maximum limits of liability are available. Please indicate what coverages and limits are desired.					
□ Premises (max limit \$2	25,000,000CSL)	Limit desired:			
□ Products Liability		Limit desired:			
□ Pyro. liability (max limi	t \$1,000,000CSL)	Limit desired:			
□ Non-owned & Hired A	uto liability on airmeet premis	es only Limit desired:			
□ Legal Liquor Liability (	max limit \$5,000,000).	Limit desired:			
□ Personal/Advertising I	njury (max limit \$1,000,000)	Limit desired:			
any acceptance of insurance; will be the basis of the contract statements contained above,	and I/We agree that the statements and I/We agree that the statements of between me/us and the Insurers. through any source including through confirmed by an authorized persor	s and declarations given above and I/we further agree that Insurers ma gh the privacy Act. No coverage is	d the application signed ay investigate any qualif	by me/us ication or	
Date	Applicant's Signature				
Name of agent or broker:					
Phone:	Fax:	email address:			