

SPORTS APPLICATION - SINGLE EVENT (Class 1)

TOURNAMENTS – such as Baseball, Basketball, Flag Football, Track & Field, Dance Competitions

F 604.669.2667

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APPLICANT INFORMATION:					
Name of Applicant:					
Operating Name:					
Effective Date: From:	Time:	AM PM	To:	Time:	AM PM
Mailing Address:					
City:	ſ	Province:	Postal Code:		
Have you ever had insurance refused or cancelled in the past 3 years? Yes ☐ No ☐					
Has there been any losses and / or injuries in the past 3 years? Yes ☐ No ☐					
Previous insurance carrier and premium:					
EVENT DESCRIPTION: all participants / teams must be reported here and included in this coverage					
Complete Description of Acti					
Number of games:					
Description & Address of Loc	cation:				
Website address for event:					
Number of Participants:	6-12:	13-18:		19 & over:	
Number of Teams:		TOTAL number of pa	rticipants for the		n:
Do all participants sign a waiver of release? Yes ☐ No ☐					
Estimated Number of Spectators:					
Level of sport played is: Amateur-Recreational Amateur-Competitive Professional					
Level of Contact: Non-Contact Incidental Contact Full-Contact I					
Do you belong to an association who already provide liability coverage to you? Yes ☐ No ☐					
U.S. operations, exposures, players?					
Describe the available medical / first aid / safety procedures:					
Do you operate to the standards of your provincial sport association? Yes No					
Is alcohol being served? Yes 🗌 No 🔲 If Yes, Please submit for referral.					
Has this event been held before? Yes ☐ No ☐ If Yes, for how many years?					
Request to Bind					
CGL including participant Accident Medical Coverage					
\$2,000,000 \$250					
** For limits greater than \$2 million, or more than 100 participants please submit to Oceanic for rating.					
1 01 millo grouter than 42 millor, 61 <u>more than</u> 100 participante produce cashin to cocame for rating.					
Insurance is not in effect until Oceanic Underwriters has issued a binder number.					
The policy will be subject to a minimum \$1,000 deductible. 15% Broker Commission on Premiums.					
Premiums are fully earned and retained once binder number issued by Oceanic Underwriters					
					ant for this contract gives false particulars
to the prejudice of the insurer or knowingly misrepresents or fails to disclose any fact in any part of this application required to be stated therein; or (b) the insured fails to inform material changes to these facts during the term of the contract; (c) the insured contravenes a term of the contract or commits a fraud; or (d) the insured willfully makes					
a false statement in respect of a claim. The Applicants have reviewed all parts and attachments of this application and acknowledge that all information is true and correct and understand that this application for					
insurance is based on the truth and completeness of this information.					
The personal information provided in this document and in the future including, but not limited to, credit information and claims history may be collected, used and disclosed by the insured's representative or insurance company, subject to local legislation, for the purpose of communicating with the insured or their representative, assessing the					
application for insurance and underwriting any such policies, evaluating claims, detecting and preventing fraud, and analyzing business results. I confirm that all individuals whose personal information is contained in this document have authorized that I agree to the above on their behalf.					
NOTE: Insurance is not in effect until Premier has issued a binder or policy documents.					
				Drokerene:	
Applicant's Signature: Broker Signature:		Date: (Print):		Brokerage: Ph#:	Fax #:
Broker Signature. Broker Email:		(i iiiil).		1 1117.	ι αλ π.
	rs Ltd. is one of Car	nada's largest Managing Underwi	iting Agents. The un	derwriting insurance	carrier varies by line of business and
region - please refer to specific quote for declaration of the underwriting insurance company(s).					
** Email application and attachments to - newbizcommercial@premiergroup.ca **					

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F 519.850.1614

Vancouver - T 604.669.5211