



## Supplemental Application - Outdoor Events

1.	Name of Event:
	Event Location:
3.	Date and Time of Event:
4.	Time and date when Set Up of Event begins:
5.	Description of Event:
6.	Describe any weather and / or ground conditions which could cause the event to be canceled, abandoned or disrupted, or cause additional costs to be incurred:
7.	Has the event been held before?
8.	If yes, how many times
	a. In all?
	b. At this location?
	c. At this time of year?
9.	Has the Event ever been affected by adverse weather and/or ground conditions?
	If Yes, please give details:
10.	If Yes to question 9, please provide detail of any measures that have been taken to prevent the situation reoccurring?
11.	Does the Event take place on tarmac, hard standing or similar surface?
	If No, what contingency plans are in place in the event of adverse weather and/or ground conditions?
12.	Have any drainage or ground improvements been made to the Event site (including car parks or camping grounds) in the last 10 years?
	If Yes, please give details:
13.	Is the car parking on tarmac, hard standing or similar surface?
	If No, what contingency plans are in place in the event of adverse weather and/or ground conditions?
14.	Are camping grounds required/provided for the Event?

15.	Has any part of the Event site (including car parks or camping grounds) been flooded or waterlogged during the last five (5) years?
	If Yes, please give details:
16.	Proportion of Tickets sold / Revenue generated in advance of the Event:
17.	Are there any other Events scheduled to take place on the Event site in the 14 days directly before or after the Event? . $\square$ Yes $\square$ No
	Please provide details:
18.	If the event has both indoor & outdoor components, what proportion of the sum insured is:  Indoors \$ Outdoors \$
19.	Is the venue or any surrounding area that is being used for the event exposed to strong wind, flood or water logging?
	If yes, please give details:
20.	Will the stage or area in which the performers work be covered by a roof and on three sides and will all electrical equipment be protected to comply with industry standards against adverse weather
	If no, please give details of what protections, if any, are in place:
	ASE READ AND SIGN BELOW: be signed by the Insured
sub	undersigned applicant represents that the statements set forth in this supplemental application and its attachments and other materials mitted to the insurer are true and correct. In accepting any quotation provided by result of this proposal request, the insured warrants that all rmation and answers provided in this supplemental application are true and correct. The Insured so warrants: Yes No
Nar	ne Signature
Titl	e Date
Em	ail

All quotations are subject to the receipt and acceptable review of the application and other underwriting information by the underwriter.

## PLEASE SIGN AND RETURN COMPLETED SUPPLEMENTAL FORM TO:

ATTN: Showstoppers, Seth Fleischer Aon Association Services, a division of Affinity Insurance Services, Inc. 1120 20th Street, NW, Suite 600 Washington, DC 20036

Email: seth.fleischer@affinitynonprofits.com Phone: 202-429-8532 or 800-432-7465 ext. 8532

Fax: 202-429-8584