

## Special Event Form

Insured :		<b>Member no.</b>	
Type of activity:	Event in a park:	Event on the premise of the Church	
	Event on a street :	Other :	
	Procession, parade, walk :		
Date:			
Description of the activity:			
Budget:			
Number of people expected:			
Detailed program:			
Sale or food preparation on the premises of the activity:	Yes:	No:	
	Who will be in charge of cooking:		
	How many food stands:		
	Will there be BBQ :	Yes:	No:
	Will there be deep fried food?	Yes:	No:
	What kind of food will be served:		
	Is there a person who has been accredited from the Quebec Agricultural and Food Ministry (MAPAQ) ? :		
Yes:	No:		
Sale of alcoholic beverages:	Yes:	No:	
If yes:	Anticipated revenue:		
<ul style="list-style-type: none"> <li>You need to obtain the proper permit.</li> </ul>			
Presence of fireworks during the activity:			
If yes:			
<ul style="list-style-type: none"> <li>You must obtain a general liability insurance certificate including a limit of insurance of minimum \$ 2 000 000 from the supplier that will perform the fireworks. The insurance certificate must specify that you are named as named parish as an additional insured on their contract. A copy of the insurance certificate will have to be transfer to us.</li> </ul>			
Yes:	No:		

## Special Event Form (suite)

<p>Will there be the installation of temporary equipment on the premise or outside the premise?</p> <p>If yes:</p> <ul style="list-style-type: none"> <li>You must obtain a general liability insurance certificate from the supplier and also a turnkey contract including assembly and dismantling.</li> <li>If you need insurance for rented equipment, please give us the following information: year, description, model, serial number and depreciated value. If we do not receive this information about the rented equipment before the date of your activity, the equipment will not be covered by your insurance contract.</li> </ul>	<p>Stage:            Yes:        No :</p> <p>How many : Dimension :</p>
	<p>Podiums:        Yes :        No :</p> <p>How many : Dimension :</p>
	<p>Tents:            Yes :        No :</p> <p>How many : Dimension :</p>
	<p>Portable toilets: Yes :        No :</p> <p>How many : Dimension :</p>
	<p>Marquees:        Yes :        No :</p> <p>How many : Dimension :</p>
	<p>Other:</p>
<p>Will there be inflatable structures?</p> <p>If yes:</p> <ul style="list-style-type: none"> <li>You must obtain a general liability insurance certificate from the supplier;</li> <li>A turnkey contract is required including assembly, operation, dismantling and supervision during use;</li> <li>A copy of the insurance certificate has to be sent to us.</li> </ul> <p>Please note that following your answer, the underwriter will analyze the situation.</p>	<p>Yes:            No:</p> <p>If yes : How many structures will be on the site:</p> <p>What are the names of the structures and included pictures:</p>
<p>Have you established a protocol for any injuries, allergies and other physical damage that participants could suffer?</p>	<p>Yes:            No:</p> <p>Who will be in charge of security:</p> <p>How many people are involved in the security:</p>
<p>Will you organize sports during your activity? If yes, please specify :</p>	
<p>Additional information:</p>	
<p>*** If you're in charge of insuring goods from suppliers while they are in your possession, you need to give us the description, year, model, serial number and the value of the equipment. If we don't have this information, we will not be able to add the equipment to your insurance contract ***</p>	

\_\_\_\_\_  
**Authorized person (Insurance coordinator or the President)**  
**(PRINTED NAME PLEASE)**

\_\_\_\_\_  
**Signature Authorized person (Insurance coordinator or President)**

\_\_\_\_\_  
**Date**