

# Insurance Application



EVENT REFUND INSURANCE

because cancellations happen

## Applicant Information

Applicant/Entity Legal Name	
Street Address	
City ST ZIP Code	
Work Phone	
E-Mail Address	
Website	
EIN #	
State of Incorporation/Domicile	
Desired Policy Effective Date	

## Coverage Option

\_\_\_ **Mandatory Coverage Premium: 0.75% of all registration fees for all event registrations (100%) processed by the Applicant's system** – assured hereby agrees to pay 0.75% of all registration fees processed on the Applicant's registration system to Nicholas Hill Group, Inc. (NHG) on a monthly basis.

\_\_\_ **Voluntary Coverage Premium: 0.825% of all registration fees only for events that are listed on the monthly report submitted by the Applicant** – Applicant hereby agrees to pay 0.825% of all registration fees for the events that are listed on the report submitted by the assured to Nicholas Hill Group, Inc. (NHG) on a monthly basis. Applicant agrees to develop and implement an electronic process (required field) to promote the voluntary program to all events using the assured's registration system. Applicant agrees to include a mandatory field requiring all events at time of on-boarding into the assured's registration platform, or upon renewing each event's annual registration service agreement, to opt-into or out-of the program electronically. Applicant hereby understands and agrees that all events must be given an equal opportunity to decide whether to participate in the program by being prompted to either opt-in or opt-out of the benefit when registering their event(s) with the Applicant's registration system. If Applicant has a list of optional features and benefits available to events utilizing the Applicant's system, it is hereby agreed that this voluntary benefit will be listed along-side such other voluntary benefits and the events will be given the opportunity, on an automated electronic basis, to participate by indicating such desire when registering their event(s) on the Applicant's system.

For both of the above coverage options, Applicant must include a monthly report detailing the name of event, total number of registrations, price of each registration and corresponding premium for each registration (among other details). Monthly reporting form to be provided by NHG. Applicant hereby agrees that this policy is an annual policy beginning on the desired effective date listed above unless notified otherwise by the insurance carrier or NHG and all premiums paid are fully earned and non-refundable.

## Type of Entity

- Registration Company
- Multiple Event Owner/Manager/Promotion Company
- Governing Body
- Other (if other, please describe your entity and type of events you process below).

## Primary Event Type

Tell us the primary type of events you process registrations for

- Athletic Events/Races (including fundraisers, fun runs, mud/obstacle races, etc.)
- Corporate, Non-Profit, Trade or Faith Based Events (including clinics, classes, etc.)
- Camps, Conferences or Retreats
- Arts & Entertainment (including concerts, film or other art events)
- Other (if other, please describe your entity and type of events you process below).

**PLEASE NOTE:** Applicant must attach a spreadsheet that includes all events that Applicant has administered registrations for within the **past 12 months**. Please include Event Name, Event Type (fun run, marathon, charity walk, etc.), Event Start Date, Event End Date, Event Location (city, state and zip code), Number of Registrants, and Registration Fee Charged.

On a separate spreadsheet, please include the same data for all known events that Applicant will be administering registrations for in the **following 12 months**.

## Approximate Number of Events

Approximate number of events your organization will handle registrations for in the next 12 months

Less than 10     10 to 100     100 to 500     500 to 1,000     1,000+

## Average Event Size

Average number of participants/registrants per event in the next 12 months

0 to 100     100 to 500     500 to 1,000     1,000+     other

## Average Entry/Registration Fee

Average cost of entry/registration fee per event in the next 12 months

\$10 to \$20     \$20 to \$50     \$50 to \$80     \$80 to 100     \$100+

## Primary point of contact for Applicant

Contact should handle all premium payments, corresponding monthly reports and claims

Name	
Title	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

## Agreement and Signature

By submitting this application, Applicant affirms that the facts set forth in it are true and complete. Applicant understands that if this application is accepted and a policy is issued, any false statements, omissions, or other misrepresentations made by Applicant may result in immediate cancellation of coverage. Applicant understands that this is an annual policy and all premiums payments are fully earned and non-refundable. The policy effective date will be the desired effective date listed on this application, unless notified otherwise by the insurance carrier. The Applicant hereby understands that the policy includes certain exclusions, limitations and limits. It is the responsibility of the Applicant to read and understand the various policy details.

Entity/Applicant Name	
Name (printed)	
Title	
Signature	
Date	