BRITMAR

Event Insurance Application

Date

Company Name

Year Formed

Nature of Business (SIC/NAICS if available)

Business & Activation Overview

Primary Contact

Primary E-Mail

Primary Phone #

Address

City

State

ZIP Code

Overview of Event Programming (i.e. conference, trade show, religious gathering, concert)

Activation Dates (Start to End MM/DD/YYYY)

Years Active (if first year, put zero)

Venue Name

Venue Website

Estimated Attendance (Daily and Total)

Type of Insurance Needed

Have You Attempted to Get Coverage (Y/N)

Referred by