

Protector Plan® *for Events*

Coverage Consultation

Simply download/print this form, answer a few questions about your special private event plans, and take it to your local agent. Your agent will work with you to find out the coverage level that's just right for you.

Honoree Information		Honoree Information	
Name	_____	Name	_____
E-mail	_____	E-mail	_____

What is your event date?	Event Type?
_____	_____
(MM/DD/YY)	(Quinceanera, Bar Mitzvah, Birthday Party, Family Reunion etc.)

How much do you plan to spend on your event?

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Level 1	Level 2	Level 3	Level 4	Level 5	Level 6	Level 7	Level 8	Level 9	Level 10
\$7,500	\$15,000	\$25,000	\$35,000	\$50,000	\$75,000	\$100,000	\$125,000	\$150,000	\$175,000

Do you want to add \$1 million liability coverage?

Many venues require liability insurance. Liability coverage can protect you in case of lawsuits resulting from:

- injury to a guest
- damage to property

\$1,000,000 liability with \$25,000 property damage
 \$1,000,000 liability with \$250,000 property damage
 \$1,000,000 liability with \$1,000,000 property damage
 No, I do not wish to have liability coverage

Do you want to add liquor liability coverage? (Not available in Maine or Massachusetts)

Liquor liability coverage is designed to protect you and your immediate family against alcohol-related accidents. For example, if an accident is caused by an intoxicated guest at the event site, you can be held liable for that guest.

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
# of guests	1-50	51-100	101-150	151-200	201-250	251-300	301-350	351-400

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Policyholder Information: (person buying the policy)

Name: _____

Relationship to honoree(s) (if applicable): _____

Address: _____
City State Zip

Phone number: (_____) _____ E-mail: _____

Ceremony Venue Information: Check here if your private event includes a private ceremony.

Location Type (religious site, hotel, restaurant etc.): _____

Indoor Outdoor Both

Location Name: _____

Address: _____
City State Zip

List as additional insured? Yes No

Notes: _____

Event Venue Information:

Location Type (religious site, hotel, restaurant etc.): _____

Indoor Outdoor Both

Location Name: _____

Address: _____
City State Zip

List as additional insured? Yes No

Notes: _____

Are you using an Event Coordinator? Yes No

If yes, Name: _____

Address: _____
City State Zip

Phone number: (_____) _____ E-mail: _____

Please note: this not an application for insurance. You are not applying for insurance when you complete this worksheet. In order to apply for the Protector Plan for Events you should work with your agent to complete an online application.

This material is for informational purposes only. All statements herein are subject to the provisions, exclusions and conditions of the applicable policy. For an actual description of all coverages, terms and conditions, refer to the insurance policy. Coverages are subject to individual insureds meeting our underwriting qualifications and to state availability.