



(c) Is coverage required for cancellation or abandonment as a result of adverse weather at the venue? (N.B. Coverage does not include adverse weather at the venue unless specifically agreed by Insurers.)

6. FOR THE PURPOSE OF ANY INSURANCE GRANTED AS A RESULT OF THIS PROPOSAL COVERAGE SHALL BE LIMITED TO THE INDIVIDUAL(S) OR GROUP(S) NAMED IN THE SCHEDULE ATTACHED TO THE POLICY.

Details of (all) person(s) to be insured. Provide name(s), age(s) and participation.

7. (a) Has any person to be insured a history of non-appearance?  
If yes, give full details.

(b) Please provide the prior itinerary and details of Tour.

8. (a) Is/are the person(s) to be insured suffering from any physical, psychological or other medical conditions? If yes, give full details.

(b) Is/are the person(s) to be insured undergoing any form of medical or other treatment? If yes, please give full details.

(c) Is/are the person(s) to be insured following any prescribed medical regime?  
If yes, please give full details.

(N.B. Any answers to Question No 8 should be made only after consultation with the person(s) to be insured. Underwriters may require this/these person(s) to undertake a medical examination.)

BEFORE ANSWERING THE FOLLOWING QUESTIONS YOUR ATTENTION IS DRAWN TO THE FACT THAT THE INSURANCE WILL CONTAIN WARRANTIES REGARDING NECESSARY ARRANGEMENTS AND CONTRACTUAL REQUIREMENTS.

9. (a) Have all the necessary arrangements for the successful fulfillment of the performance(s) or event(s) to be insured been made? If no, please give full details.

(b) Have all necessary licenses, visas, and/or permits been obtained and have all contractual arrangements been confirmed in writing? If no, please give full details.

10. What limit of Indemnity is required?

	Amount
(1) Expenses	(1) _____
(2) Net Profit	(2) _____
(3) Guarantee	(3) _____ (being __% of gross guarantees)
(4) Other (specify)	(4) _____

\_\_\_\_\_

Total \_\_\_\_\_

11. Has/have the Proposer(s) and/or any Insured Person ever suffered a loss whether insured or otherwise in respect of his/their involvement in any type of performance(s) or event(s)? If yes, please give full details.

12. Are you aware of any matter, fact, circumstance or incident existing or threatened that could possibly affect the performance(s) or event(s) and might result in a loss under this Insurance? If yes, please give full details.

13. **CONDITIONS OF QUOTATION**

Any quotation provided by Underwriters as a result of this proposal will be subject to:

- (a) Final acceptance by the Proposer(s) and then Underwriters prior to the acceptance date shown in the quotation after which the resulting insurance cannot be canceled.
- (b) The Proposer(s) undertaking to advise Underwriters of any change in the information supplied occurring prior to the inception date of any insurance subsequently issued.
- (c) Underwriters have no obligation to accept the risk if there has been any happening or circumstance whether advised by the Proposer(s) or otherwise, arising prior to acceptance by Underwriters which increases or could increase the possibility of a loss or in any way materially alters the risk as quoted. However, Underwriters at their sole discretion may decide to provide an alternative quotation.
- (d) The Proposer(s) having declared all material facts likely to influence a reasonable Underwriting to determining:
  - 1) Whether or not to accept the risk;
  - 2) the premium
  - 3) the terms, conditions exclusions and limitations
- (e) 1) Any Proposer who acts on behalf of others being deemed to have obtained and declared all the information, provided after making inquiry with each of them: this condition also applies to any intermediary.
  - 2) The Proposer(s) accepting the quotation doing so on behalf of all others and accepting responsibility for payment of the premium as detailed in (g) below.

- (f) The Proposer(s) undertaking that no other insurance has been purchased on this specific risk and none shall be without Underwriter's prior written approval: in the event of such approval being given, the terms, conditions, exclusions, limitations, and premium set out in any quotation may be amended by Underwriters.
  
- (g) The Proposer(s) paying the premium with acceptance of the quotation. If [in accordance with (a) and (c) above] Underwriters do not accept the risk of the premium will be returned.

To the best of my knowledge and belief the information provided in connection with this proposal, whether in my own hand or not, is true and I have not withheld any material facts. I understand that non-disclosure or misrepresentation of a material fact will entitle Underwriters to void the insurance.

(N.B. A material fact is one likely to influence acceptance or assessment of this proposal by Underwriters; if you are in any doubt as to what constitutes a material fact you should consult your Broker.)

I understand that the signing of this proposal does not bind me to complete or Underwriters to accept this insurance but agree that, should a contract of insurance be concluded, this proposal and the statements made herein shall form the basis of the contract.

Proposer's Name \_\_\_\_\_

Position/Title \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

All questions should be directed to:

**Frost Specialty Risk**

1025 16th  
Suite 300  
Nashville, TN 37212

Telephone: (615) 322-9171  
Facsimile: (615) 322-9272

