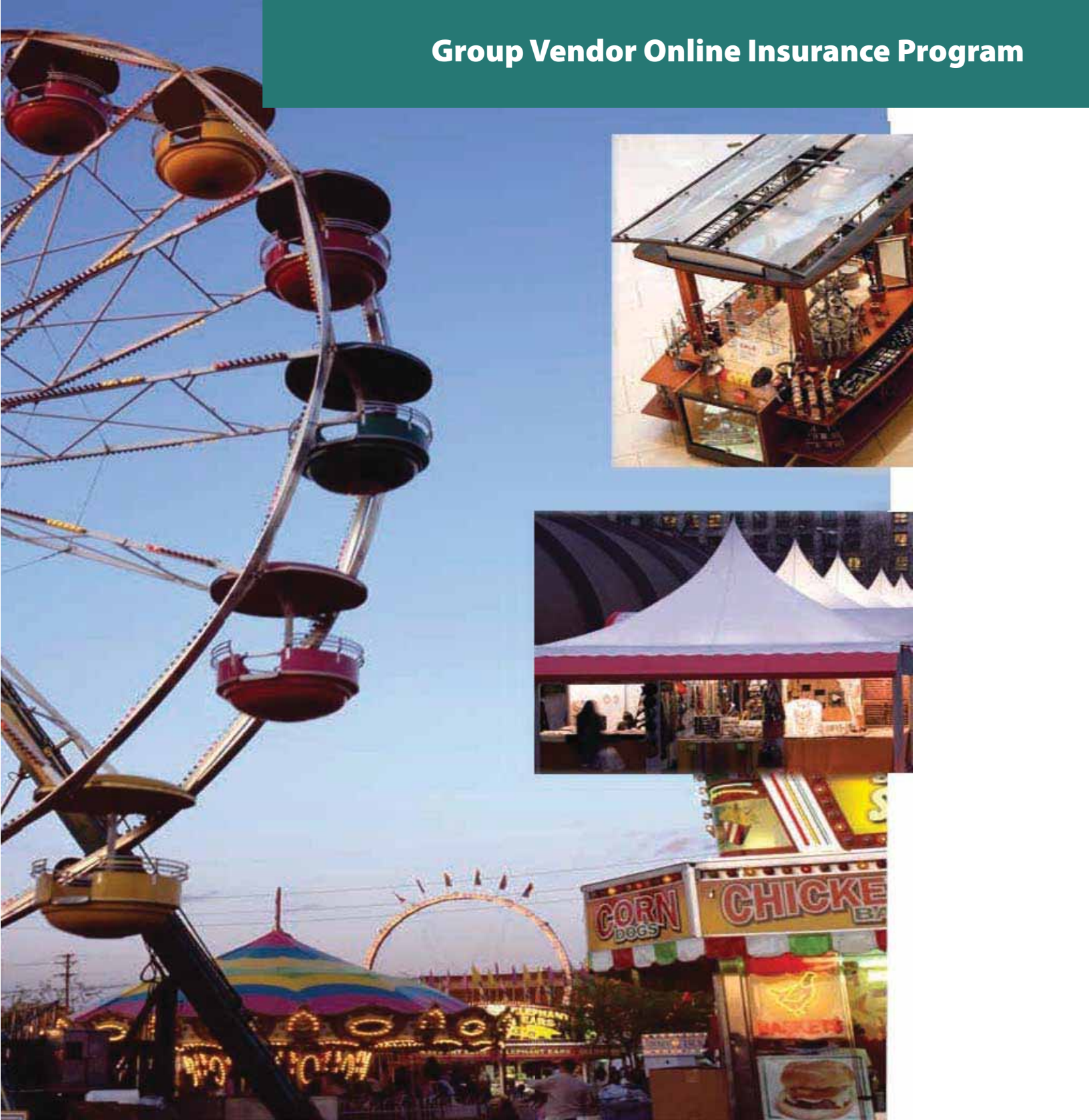


# Group Vendor Online Insurance Program



Discounted vendor insurance program ideal for many events:

- Festivals
- Farmers Markets
- Trade Shows
- Conventions
- Weddings
- & Many more



**World Events Insurance Solutions**  
SPECIALTY INSURANCE EXPERTS

# Group Vendor Online Insurance Program

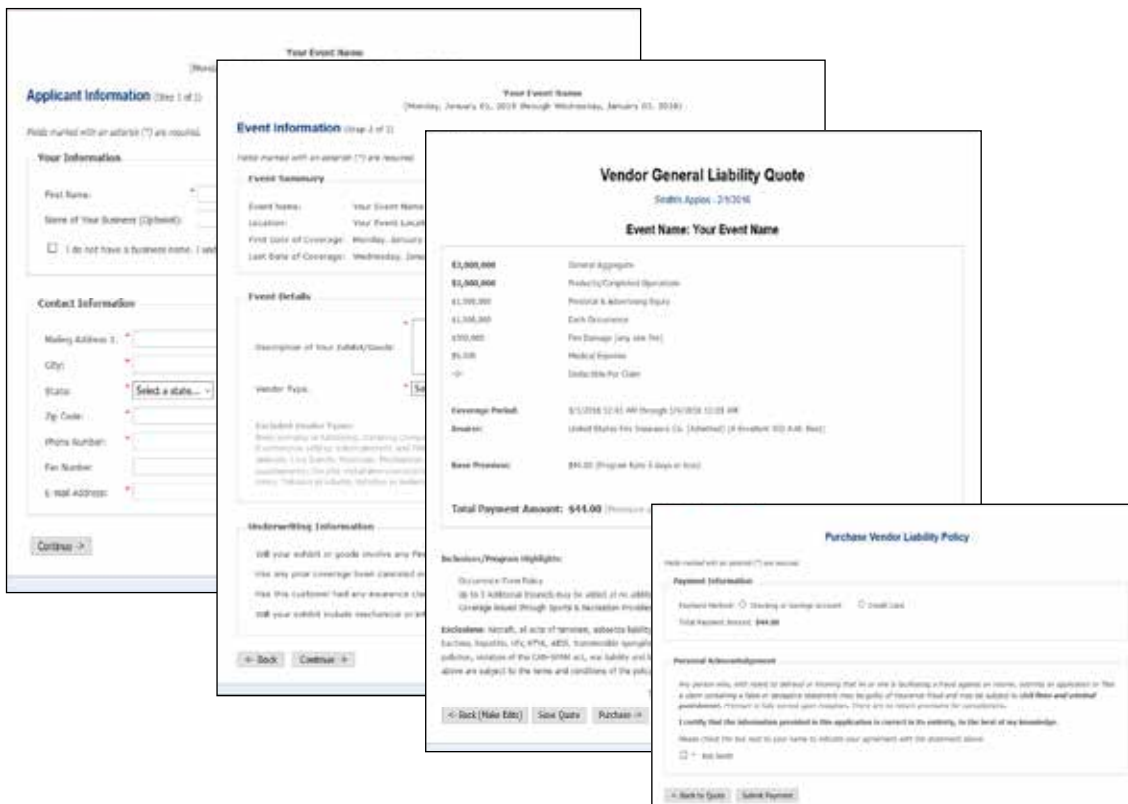
## A Liability Insurance Program Providing Protection From Lawsuits of Bodily Injury and/or Property Damage

The Francis L. Dean & Associates group vendor liability program has been structured to make insuring your event's vendors as easy as possible. This program is only available as an online program where each vendor applies specifically for your event & receives their own policy limits at a discounted group price. Ideal for one-day special events, year long events, and anything in between.

### How does the online group vendor program work?

Complete the enrollment form on page 4 of this brochure and submit it to [support@worldeventsinsurance.com](mailto:support@worldeventsinsurance.com). You set the policy term, coverage limits and additional insureds. You will receive an email with a link to your event's group vendor website which you can forward to the vendors attending your event. Each vendor will apply online for insurance customized to your event's needs. This provides immediate certificate issuance upon completion of the application and successful payment. The vendor and event holder receive certificates automatically. Additional insureds may also receive copies automatically.

### What will my online group vendor website look like?



To visit a sample vendor website, please click:

<https://securevendorinsurance.com/Sample3>

# Group Vendor Online Insurance Program

## Who is covered

This program provides protection for the Policyholder against claims of bodily injury liability, property damage liability, personal and advertising injury liability, and the litigation costs to defend against such claims.

### Coverage includes suites arising out of:

- Injury or death of spectators
- Injury or death of volunteers
- Property damage liability

- Products liability coverage (completed operations)
- Incidental medical malpractice
- All activities necessary to conduct activities
- Ownership, use or maintenance of fields or vendor locations
- General negligence claims
- Cost of investigation and defense of claims, even if groundless
- Corporal punishment

## Exclusions

Aircraft, all acts of terrorism, asbestos liability, claims made by athletic participants, employment related practices, fungi and bacteria, hepatitis, HIV, HTVL, AIDS, transmissible spongiform encephalopathy, lead poisoning, nuclear energy liability, pyrotechnics activity, total pollution, violation of the CAN-SPAM act, war liability and liability for occurrences prior to the effective date of coverage. All of the above are subject to the terms and conditions of the policy.

## Group Vendor Rates

Coverage is provided up to \$1,000,000.00 per occurrence and includes a \$5,000 medical expense benefit. There is no deductible amount.

Premium rates below are per vendor and are determined by the length of the policy.

**There is a \$35.00 administrative fee in addition to each premium rate.**

General Aggregate	Policy Term				
	5 days or less	6-14 days	15-30 days	1-6 months	6 months - Annual
\$1,000,000.00	\$42.00	\$84.00	\$126.00	\$246.00	\$312.00
\$2,000,000.00	\$44.00	\$88.00	\$132.00	\$258.00	\$327.00
\$3,000,000.00	\$46.00	\$92.00	\$139.00	\$271.00	\$344.00
\$4,000,000.00	\$49.00	\$97.00	\$146.00	\$285.00	\$361.00
\$5,000,000.00	\$51.00	\$102.00	\$153.00	\$299.00	\$379.00

### Excluded Vendor Types:

Body piercing or tattooing, Catering Companies, Christmas Tree Retail Lots, Corn or Hay maze, Disc-Jockeys for events over 200 attendees, E-commerce selling, Entertainment and Film Industry Vendors, Fireworks sales & displays, Haunted attractions, Hot wax impressions, Live animals, Live Bands, Massage, Mechanical or inflatable amusement devices, Medical testing, Motor sports activities, Nutritional/health supplements, On-site installation/service/repair of products, On-site equipment rental, Oxygen/aromatherapy, Storefront operations, Time share sales, Tobacco products, Vehicles in motion, Watercraft exhibits on water, Weapon sales, Weight-loss plans or products, Wholesale business, Wedding/Event Planners, E-Cigarette Productions & Marijuana and/or Marijuana Paraphernalia, Carnival Rides, Permanent & Mobile Rock Wall Structures, Security Forces, Trampolines, and Zip Lines.

# Group Vendor Online Insurance Program

Upon submission of this enrollment form to [support@worldeventsinsurance.com](mailto:support@worldeventsinsurance.com) you will be emailed a link to a secure vendor website for you to provide to the event's vendors. They may purchase coverage specifically designed for your event at a discounted vendor rate. These rates are only available through this online program.

## Part I Proposed Policyholder *(Please Print or Type)*

Name of event \_\_\_\_\_

Description of event \_\_\_\_\_

Location of event \_\_\_\_\_

Location address \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone number \_\_\_\_\_ Email address \_\_\_\_\_

Event start date \_\_\_\_\_ Event termination date \_\_\_\_\_

Desired start date of coverage \_\_\_\_\_ Desired last date of coverage \_\_\_\_\_

*\*Desired dates of coverage should include the set up/take down dates required. These dates will determine the policy term, and therefore the premium.*

Estimated number of vendors at the event \_\_\_\_\_

List email addresses to receive copies of the vendor's certificate(s). Vendor and agent will automatically receive copies of certificate(s)

\_\_\_\_\_  
\_\_\_\_\_

## Part II Insurance Coverage

All policies include a per occurrence limit of \$1,000,000.00 and medical payments of \$5,000.00. Please see rate chart on page 3 for reference.

Choose the general aggregate limit vendors are required to have:

\$1,000,000.00     \$2,000,000.00     \$3,000,000.00     \$4,000,000.00     \$5,000,000.00

**Required additional insureds (who does the vendor need to name):** Standard additional insureds are included at no additional cost. If the additional insured needs to receive a copy of the certificate directly and the email address is not listed above, please include below.

Certificate Holder Name	Email Address (optional)	Full Mailing Address (Including City, State, Zip)	Additional Insured Wording Instructions	Relationship
				<input type="checkbox"/> Event Promoter/ Organizer <input type="checkbox"/> Event Venue
				<input type="checkbox"/> Event Promoter/ Organizer <input type="checkbox"/> Event Venue
				<input type="checkbox"/> Event Promoter/ Organizer <input type="checkbox"/> Event Venue

### World Events Insurance

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