

Insurance under Vendors/Users Program for VA Equine Extravaganza

Event: **Virginia Equine Extravaganza - 2005**

Name of Exhibitor: _____

Name of Owner: _____

Street Address: _____

City: _____ State _____ Zip _____

Daytime Phone: _____

LIST ALL PRODUCTS, FOOD SOLD OR SERVICE PROVIDED:

- 1) General Liability Coverage will be provided only for the period of the show including setup and tear down.
- 2) Rates:
 - a) \$85 for the first booth or stand \$ _____
 - b) \$42 for each additional booth, location or stand \$ _____

Total due: \$ _____

Personal checks from Vendors will not be accepted – Money order or cashiers check only

Items listed below require additional premium and should be approved before acceptance for endorsement to your policy:

Liquor Liability-Pony Rides-Petting Zoo's- Exotic Animals-Organ Grinders-Dunking Booths-Golf Carts/Scooters-Entertainers-Game Booth

Signature: _____ Date: _____

The following are **NOT** acceptable for endorsement:

Permanent Tattoos, Body Piercing & Massages-Haunted Houses-Concerts/Promoters/Performers- Playground Equipment-Wheelchair/Stroller Rentals-Gun Shows-Climbing Walls-Inflatable Amusements- Amusement Rides/Devices-Child Care-Sale of Tobacco Products-Autos or Auto Parts-Rodeo Events- Motor sport events-Ice/Roller Skating

Applications and payment should be mailed at least 2 weeks prior to move in date to:

Specialty Program Insurors, Inc.; P.O. Box 2946, Shawnee Mission, KS 66201-1346
800-338-3313 Fax 913-676-9358 Email tbrown@hwins.com