Please fax the completed form attn: Special Events at (619) 699-0902 or email to [**sep@alliant.com**.](mailto:sep@alliant.com) **Please send at least 10 days in advance of the event**. If you do not receive a completed proposal within 48 hours, please call Special Events Desk at (800) 821-9283 for status. (An email version of this form is also available upon request)

|  |  |
| --- | --- |
| **MEMBER INFORMATION** | |
| Member Name: |  |
| Contact: |  |
| Phone Number: | Fax Number: |
| Email Address: |  |

*\*if more than one please attach a separate page*

Names\*:

Type of Music?

How Many?

Bands?

Carnival Rides?

Are Fireworks Included?

Will Waivers be signed?

Number of participants (If sports related)

Ages of participants:

Ages of Attendees:

Location:

Attendance (per day):

Hour(s):

Name/Type of Event: Description of Event:

Date(s):

**EVENT INFORMATION**

1. What securities are in place to avoid overindulgence and underage drinking?
2. Are identifications checked and wristbands issued?
3. Is this in a fence area?

If yes please complete the following questions

Liquor Liability Needed?

Additional Insureds:

Joint Sponsor(s):

Number of Exhibitors Requiring Coverage (No Sales)\*:

Number of Concessionaires Requiring Coverage (Non Food Sales)\*: Number of Concessionaires Requiring Coverage (Food Sales)\*:

*\*Please provide separate list of concessionaires / exhibitors to be covered*

**ADDITIONAL INFORMATION**

# Increase Limit Requested:

* $1,000,000/$3,000,000 Total Event premium will be increased by 11%
* $2,000,000/$2,000,000 Total Event premium will be increased by 19%

# Property Damage :

$50,000 Premium $50.00

$100,000 Premium $100.00

|  |  |
| --- | --- |
| **COMPANY USE ONLY:** | |
| Hazard Group: | Attendance Premium: |
| Exhibitors Premium: | Concessionaires Premium: |
| Liquor Liability Premium: | Additional Insureds Premium: |
| Property Damage Premium: | Increase Limit Premium : |
|  | **TOTAL PREMIUM**: |