

ROTARY INSURANCE PRO FORMA

(This form to be submitted to DIO prior to the commencement of any project/event)

To: District Insurance Officer John Honey

Email: insurance@rotary9465.org.au

The Rotary Club of..... wishes to advise that it will be conducting the following event/s as part of its activities, and requires the event/s to be noted and included under the District Insurance Policies.

1. Brief Description of Activity:

.....

2. Date of Activity: ____/____/____ Duration: From _____ to _____

3. Location of Activity:

.....

4. Will the activity involve participation in any sport, game, match, race, practice, training course, trial, contest or competition? **YES / NO**. If "YES", please provide copy of Disclaimer for the event

5. Have you been asked by any other organisation or person to (a) indemnify them as a third party or (b) hold any other organisation "harmless" under the Rotary Insurance for the activity? **YES / NO**
(If yes, refer to your District Insurance Officer for advice before entering into any agreement).

6. Will the event involve persons under the age of 18yrs? **YES/NO**

7. Will the event involve amusement rides/devices? **YES/NO**

8. Will the event include markets and stall holders? **YES/NO**

9. Will alcohol be sold or supplied during the event? **YES/NO**

10. Approximate number of community participants:

11. Risk Management Form Completed? **YES/NO**

12. Certificate of Currency required? **YES/NO**

13. If applicable, provide details of parties to be noted:

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Rotarian Contact:

Details: Phone/Fax Number:

Email address:

COVER CONFIRMED UNDER ROTARY POLICY

YES/NO

DATE: ____/____/____