

Insurance Pro Forma

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

To: District Insurance Officer _____ Email: _____
(insert DIO's Name) (insert DIO's email address)

The Rotary Club of _____ (insert Rotary Club name) 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. Is this Event organised and run by Rotary? YES / NO
2. Brief Description of Activity: _____
3. Date of Activity: ____/____/____
4. Duration
 From: _____
 To: _____
5. Location of Activity: _____
6. 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
7. 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).
8. Will the event involve persons under the age of 18yrs? YES/NO
9. Will the event involve amusement rides/devices? YES/NO
10. Will the event include markets and stall holders? YES/NO
11. Will alcohol be sold or supplied during the event? YES/NO
12. Approximate number of community participants:
13. Risk Management Form Completed? YES/NO
14. Certificate of Currency required? YES/NO
15. If applicable, provide details of parties that are to be noted as interested parties.

Rotarian Contact:	<i>(insert Rotarian's name)</i>
Details: Phone Number:	<i>(insert Rotarian's Phone Number)</i>
Email address:	<i>(insert Rotarian's Email Address)</i>

COVER CONFIRMED UNDER ROTARY POLICY	YES/NO
DATE:	____/____/____

Note: For repetitive events such as BBQ's your DIO only needs this form to be completed once a year.