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 addr	ess)
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.		
Is this Event organised and run by Rotary?		YES / 🗌 NO
Brief Description of Activity:		
Date of Activity:/		
Duration From:	-	
To:	- :	
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		
(a) indemnify them as a third party or (b) hold any other organisation "harmless" under the	e Rotary Insurance for the activity?	YES/NO).
Will the event involve persons under the age of 18	yrs?	YES/NO
Will the event involve amusement rides/devices?		YES/NO
Will the event include markets and stall holders?		YES/NO
Will alcohol be sold or supplied during the event?		YES/NO
Approximate number of community participants:	g., g.	YES/NO
Risk Management Form Completed?		YES/NO
Certificate of Currency required?		YES/NO
15. If applicable, provide details of parties that are to be noted as interested parties.		
starian Contact:	(insert Rotarian's name)	
((D () L D) November		per)
Email address: (insert Rotarian's Email Address)		
OVER CONFIRMED UNDER ROTARY POLICY	YES/NO	
ATE:		
	e Rotary Club of	(insert DIO's Name) (insert DIO's email address (insert DIO's email address (insert Rotary Club nadvise that it will be conducting the following event/s as part of its activities and requires the red and included under the District Insurance Policies. Is this Event organised and run by Rotary? Brief Description of Activity: Date of Activity: Duration From: To: Location of Activity: Will the activity involve participation in any sport, game, match, race, practice, training cour or competition? 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? (If yes, refer to your District Insurance Officer for advice before entering into any agreement will the event involve persons under the age of 18yrs? Will the event involve amusement rides/devices? Will alcohol be sold or supplied during the event? Approximate number of community participants: Risk Management Form Completed? Certificate of Currency required? If applicable, provide details of parties that are to be noted as interested parties. Interian Contact: (insert Rotarian's name) VER CONFIRMED UNDER ROTARY POLICY YES/NO VES/NO

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



