



Gallagher

Insurance | Risk Management | Consulting

Form B - SPECIAL EVENTS QUESTIONNAIRE District 7815

RENTED/BORROWED EQUIPMENT & INVENTORY

Club Name: _____

Contact Person: _____

Contact Phone Number: _____

Contact Fax Number: _____

Contact E-Mail: _____

Date of Event: _____

Description of Event: _____

Location of Event: _____

Start Time of Event: _____

Finish Time of Event: _____

Description of Rented/Borrowed Equipment:

ITEM	REPLACEMENT VALUE
_____	_____
_____	_____
_____	_____
_____	_____

Where will the equipment be stored when not being used? _____

What is the maximum value of inventory (Liquor & Food supplies) that could be on site at any time? \$ _____.

Date Submitted: _____ Contact Person Signature: _____

**Please print this application, complete it
and fax it or scan it back to our office at (204) 487-0448
Rotarian: Chris Iwankow or Pat DeGroot
e-mail [chris_iwankow @ajg.com](mailto:chris_iwankow@ajg.com) or pat_degroot@ajg.com**