

SUPPLEMENTAL APPLICATION

CONCERTS

Track Name/Named Insured:

Event Date(s) and Time each day:

Indoors or Outdoors?

Type of Concert/Band/Music each day:

Estimated Attendance each day?

Will there be racing on this day or on each day? If Yes, is there an additional admission fee for the concert?

Security Provided by:

Type of Security: (uniform, peer group, ushers, etc.):

How many of each type:

Who is providing traffic control?

Will liquor be sold during the event?

If so, who will sell liquor?

If so, will a certificate of insurance be provided evidencing coverage?

Who is providing Staging

Sound

Lighting

Do you have contracts with these companies? Please answer for each

Are you required by contract to name anyone as additional insured? Please answer for each

Do you have certificate of insurance from the companies providing the Security, Staging, Sound, Lighting (if applicable)? Please answer for each

Will there be any additional seating other than grandstands?

If so, describe seating:

Please list any and all activities taking place, per each day:

Signing this application does not bind the applicant or the Company to complete the insurance.

Signed _____ Title _____ Date _____

PLEASE PROVIDE A COPY OF THE CONTRACT(S); DIAGRAM STAGE SET UP, ALONG WITH DISTANCE OF STAGE TO SPECTATORS, AS WELL AS ANY PROMOTIONAL MATERIALS.