

Aon NFP Insurance Proposal Form



Contact Details

Insured Name

Person to contact

Email

Postal address

State

Post Code

Phone No.

Fax No.

Broker

Year Established:

Policy Inception Date:

Number of Volunteers

Number of Paid Workers

ABN Number

Is the Organisation Stamp Duty Exempt?

☐ Yes

☐ No

Website Address:

Is the Organisation an Incorporated Body

☐ Yes

☐ No

If Yes, under what legislation is it incorporated?

List all activities of the organisation, including those involving paid employees & volunteers:

Events Questionnaire

Please complete for every major event with more than 250 attendees

Organisation Name:

Event Name, if different

Description of Event/Activities: (Please provide brochures, flyers, etc)

Location of Event/Activities Site:

Date of Event/Activities:

Hours of Operation:

Expected Number of Attendees:

Have you run this event before?

☐ Yes ☐ No

If Yes, how many attended last time this Event was held?

How many Stalls are at the Event?

Do all vendors/exhibitors, contractors, food providers, amusement operators, performers carry their own liability insurance

If Yes, copies of policies and/or certificates of currency must be provided

☐ Yes ☐ No

Are you noted as Principal on the above vendors, etc insurance?

☐ Yes ☐ No

Will alcohol be sold at the event?

If Yes, please complete the Alcohol Declaration attached

☐ Yes ☐ No

Are attendees allowed to bring alcohol to the event?

☐ Yes ☐ No

Will there be entertainment at the event

e.g. opera, jazz, rock, theatre, stilt walkers, etc?

☐ Yes ☐ No

Type

Do performers hold your organisation responsible for injuries suffered?

If Yes, please provide copy of contract

☐ Yes ☐ No

Is there any security at the event?

☐ Yes ☐ No

☐ Internal ☐ External

If Yes, do they hold their own Liability insurance?

☐ Yes ☐ No

Is there medical personnel at the event?

☐ Yes ☐ No

If Yes, what sort, number and qualifications?

Signature

Date

Alcohol Questionnaire

Name of Organisation:

Name Liquor License is in:

Has your Liquor License ever been suspended or revoked

☐ Yes

☐ No

If Yes, why?

Class of License:

Days Selling Alcohol:

Hours of Alcohol Sales

Are attendees allowed to bring alcohol to your event?

☐ Yes

☐ No

Are under aged people at the event?

☐ Yes

☐ No

Are alcohol sales restricted to a confined space?

☐ Yes

☐ No

Are appropriate "responsible" servers of alcohol notices displayed?

☐ Yes

☐ No

Are volunteers/staff trained in responsible service of alcohol?

☐ Yes

☐ No

Signature

Date

--	--	--	--	--	--	--	--