

2017 Special Event Insurance Application

Submitted through:
Central California Fellowship
9960 Business Park Dr. #110
Sacramento, CA 95827-1719
Office: (916) 454-1771
Email: centraloffice@aaasacramento.org
Fax: (916) 452-9132

Insured: Central California Fellowship of Alcoholics Anonymous
Policy Number: 201632661 NPO

Please complete ALL questions. This request form does not automatically bind coverage for the additional insured being requested.

Applications for a special event must be submitted 30 days prior to the event.
Insurance is \$100 per event.

1. Name (*as it must legally appear on the Certificate*) and address of landlord.

2. Landlord's contact person:
Name: _____
Phone: _____
Email: _____
Fax: _____
3. A.A. Group/Meeting information:
Group Name: _____
Address: _____
Contact Name: _____
Please keep a current name on file with Central Office at all times.
Contact Address: _____
Contact Phone: _____
Contact Email: _____
4. A.A. Special Event information:
Event Name: _____
Event Date/Time: _____
Event Location: _____

Please deliver this application to CENTRAL OFFICE, together with the premium due. We will submit the application and a Certificate will be sent directly to your landlord, with a copy to Central Office. We cannot submit your application without full payment of the premium due; sorry – no exceptions.

DO NOT DELIVER THIS APPLICATION TO THE INSURANCE COMPANY OR ITS AGENT
DIRECTLY;
NO CERTIFICATE WILL BE ISSUED.