

## 2023 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](mailto: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.**

**NO REFUNDS**

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.**