

## **TEMPORARY EVENT APPLICATION**

Named Insured:					
EVENT DATES:	то:				
VENUE NAME AND ADDRESS					
EVENT TO BE HELD:	☐ INDOORS ☐ OUTDOORS				
ADDITIONAL INTEREST					
PLEASE LIST ALL ADDITIONAL I	NTERESTS AND THEIR BUSINESS RELATIONSHIP:				
		15			
LOSS PAYEE	Name and Address:	RELATIONS	HIP:		
ADDITIONAL INSURED	No. 2012 Annual Control	D			
LOSS PAYEE	Name and Address:	RELATIONS	HIP:		
ADDITIONAL INSURED	Niver was Appendix	D=: .=:e.:e			
LOSS PAYEE	Name and Address:	RELATIONS	HIP:		
Additional Insured					
EVENT INCODMATION					
EVENT INFORMATION					
LIST ALL ANCILLARY ATTRACTI	IONS:				
AMBULANCE ON SITE?	YES NO FIRE EXTINGUISHERS ON SITE?	YES NO T	YPE:		
ARE YOU USING REEL MEDIA MGA WAIVER AND RELEASE FORM PROCEDURES?  YES NO IF NO, PLEASE EXPLAIN:					
NUMBER AND TYPE OF SECURITY PERSONNEL: UNIFORMED OFFICERS: CONTRACTED: EMPLOYEES:					
DO ALL TRUCKS HAVE REMOTE IGNITION INTERRUPTERS? YES NO IF YES, ARE ALL SYSTEMS TESTED PRIOR TO EACH EVENT? YES NO					
RIDE TRUCK PRESENT?	YES NO IF YES, PROVIDE DETAILS REGARDING	TRUCK & PROGRAMS:	· <del></del>		
LIST ANY SPECIALIZED VEHICLE	EXHIBITIONS (I.E JET VEHICLES, FREESTYLE MOTOCROSS, E	тс.):			
DO ALL MONSTER TRUCKS PARTICIPATING MEET OR EXCEED THE STANDARDS OUTLINED IN THE CURRENT MTRA RULE BOOK? YES NO					
BARRIER / FENCING / GR	<u>RANDTANDS</u>				
			T=		
	TECTING ALL SPECTATOR AND PARTICIPANT AREAS?	YES NO	Type of Material:		
HEIGHT OF GUARD RAIL:	IF OTHER THAN CONCRETE, WHAT ARE THE SUPP		DISTANCE APART:		
Is there a Crowd Control		·	HEIGHT:		
	FENCE RESTRICT ALL VIEWING PERSONS BEHIND THE GUAR		No		
	SPECTATORS RESTRICTED TO THE GRANDSTANDS?	YES NO			
	NSTRUCTION: DISTANCE BETWEEN COURS		SEATING CAPACITY:		
		MATED ATTENDANCE:	TIME PERIOD OF SHOW:	Hours	
ARE ANY ROWS BLOCKED OFF	DURING EVENT? YES NO IF YES, SHOW OF	N DIAGRAM.			
INADODTANT: Comme		:	an and Innetton		
IIVIPORTANT: Coverag	ge will not be provided unless following pa	ge is completed t	or each location.		
I understand that this application for insurance and any policy or endorsement issued as a result of the approval of this application will only provide insurance					
for motorsports operations and any other approved operations scheduled on the issued policy. I further understand that no coverage will be provided for any					
other business, operations or services unless they are specifically added to any policy issued for an additional premium. I believe the statements in this					
application are true and correct. I understand that the insurer will rely on these statements if a policy is to be issued. Providing false information in an application for insurance is fraud, which is a crime in many states.					
application for insurance is fr	auu, wnich is a crime in many states.				
Date	Signature of Insured	<del></del>	Title		

## **EVENT LOCATION DIAGRAM SHEET**CURRENT SURVEY REQUIRED — (CURRENT MEANS AT LEAST EVERY TWO YEARS.)

**VERY IMPORTANT:** POLICIES/CERTIFICATES/BINDER **WILL NOT** be processed by Underwriter unless a DETAILED DIAGRAM and **SUPPORTING PHOTOS** accompany enrollment form and applicable premium.

**SHOW LOCATION AND IDENTIFY:** Spectator viewing area, spectator parking areas, restricted areas, pit areas, competition course, barrier, fences, concessions, restrooms, fire extinguishers, ambulance, security personnel, distance between course and nearest crowd control fence and direction North.

**PICTURES MUST BE TAKEN:** Between course and any area used by spectators and/or participants, parallel to course and barrier/fence. (Note direction taken and number photo)

**USE SYMBOLS:** include the following symbols in your diagram

X fire extinguishers	barrier
(A) ambulance	fence over 5'
c concessions	fence under 5'
	> photograph Indicate photograph number in circle and position
R rest rooms	arrow in the direction the photo was taken

Underwriting Surveys. Reel Racing MGA, for the insurance company, shall be permitted but not obligated to survey the Insured's property and operations for underwriting purposes at any time. Neither the right to make an underwriting survey nor the making thereof nor any report thereon shall constitute an undertaking, on behalf of, or for the benefit of, any Insured, or others, to forecast any accident or its severity or determine or warrant that such property or operations are safe or helpful, or are in compliance with any engineering standards, rule or regulations. Underwriting surveys are for the sole purpose of determining the insurability of certain property and operations and not safety. The Insured is solely responsible for the safety of its facilities and operations and shall not rely upon any underwriting surveys to determine the safety of its track or operations and shall not diminish or forego its own safety practices and procedures.

Date	Signature of Insured	Title

I ATTEST THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND COMPLETE.

THIS IS NEITHER AN OFFER OF COVERAGE NOR AN APPLICATION FOR INSURANCE. REQUESTS FOR COVERAGE WILL BE SUBJECT TO COMPANY UNDERWRITING STANDARDS. ACTUAL COVERAGE TERMS WILL BE DESCRIBED IN A POLICY OF INSURANCE IF ONE IS ISSUED.