



John Rix

District 9520 Insurance Officer
 Rotary Club of Berri
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Rotary Insurance Pro Forma

Rotary Club of:

Date:

Our Club wishes to advise that it will be conducting the following event/s as part of its activities, and requires the event/s to be noted and included under the District Insurance Policies.

1	Brief Description of Activity:			
2a	Date of the Activity:			
2b	Duration of the Activity:	From:		To:
3	Location of the Activity:			
4	Approximate number of community participants:		Number:	
				Yes or No
5	Will the activity involve participation in any sport, game, match, race, practice, training course, trial, contest or competition? <i>If "YES", please provide copy of Disclaimer for the event.</i>			
6	Have you been asked by any other organisation or person to: (a) indemnify them as a third party, or (b) hold any other organisation "harmless" under the Rotary Insurance for the activity? <i>(If yes, refer to your District Insurance Officer for advice before entering into any agreement).</i>			
7	Will the event involve persons under the age of 18 years?			
8	Will the event involve amusement rides or devices?			
9	Will the event include markets and stall holders?			
10	Will alcohol be sold or supplied during the event?			
11	Risk Management Form Completed?			
12	Certificate of Currency required?			
13	If applicable, provide details of any parties to be noted:			

Contact Rotarian's Name:

Rotarian's Phone number:

Rotarian's Email address:

OFFICE USE ONLY

YES or NO

date

initials

Cover confirmed under Rotary Policy

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