



Take1
INSURANCE

A DIVISION OF
INNOVATION GROWTH
PARTNERS SPECIALTY, LLC

APPLICATION

Touring Entertainer Supplemental Application

MANAGED BY:

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Touring Entertainer Supplemental Application

1. Named Insured:
2. Type of Music (Please attach Bio):
3. Attach Itinerary
4. Does the insured have any of the following as part of their tour. If yes, please describe in full: Stunts: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: _____ Pyrotechnics: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: _____ Throwing Objects, such as, but not limited to clothing, drum sticks, etc: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: _____
5. Is the insured responsible for any Concessions <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: a. What is the insured selling _____ b. Gross Revenues: _____
6. Does the Named Insured do any Self-Promoting <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, please describe _____
7. What contracts has the insured signed or will be signed requiring that the Named Insured assumes liability for the other Party, such as Bus, Trucking, Venue or Equipment _____ _____ _____
8. Do drivers become employees of the Named Insured by contract. If yes, provide payroll _____
9. Cost of Hire of Rental Vehicles: _____