MCA Regional Club Car Show Application

REGION INFORMATION

Club Name _____

Address _____

City/ST/Zip _____

This policy provides: $1,000,000 of General Liability Insurance

Date of Car Show: _____

Location of Show: _____

_____

Number of Expected Cars: _____

- Has an agreement, contract, or permit been executed for the use of the event location? ☐ Yes ☐ No (If yes, please include a copy of the agreement.)
- Will there be paid spectator attendance? ☐ Yes ☐ No
- Will there be any driving activities such as road tour, parade, poker run, autocross, road rally, etc.? ☐ Yes ☐ No
- Will the chapter be selling food or beverage? ☐ Yes ☐ No
- Will alcohol be sold or distributed? ☐ Yes ☐ No

CONTACT INFORMATION

Club Representative _____

Email _____

Daytime Phone _____

Certificate Holders:

Will a certificate of insurance be required for a third-party? ☐ Yes ☐ No

If "Yes", please list all additional insureds (with address) to be included on the certificates along with their business relationship to your club. (ie: land or building owner, sponsor, etc.)

_____

_____

_____

_____

_____

_____

Note: This is not an Automobile Liability Insurance policy. No coverage is provided for claims arising from the operation of automobiles or motorized vehicles. _____ (Initial)

AMERICAN SPECIALTY INSURANCE & RISK SERVICES, INC. for the insuring Company, shall be permitted but not obligated to inspect the INSURED'S property and operations for UNDERWRITING AND/OR LOSS CONTROL PURPOSES at any time. Neither the right to make an UNDERWRITING AND/OR LOSS CONTROL EVALUATION nor the making thereof nor any report thereof 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 healthful, or are in compliance with any engineering standards, rules, or regulations. The establishment of underwriting criteria and UNDERWRITING AND/OR LOSS CONTROL EVALUATIONS ARE FOR THE SOLE PURPOSE OF DETERMINING THE INSURABILITY OF CERTAIN PROPERTY AND OPERATIONS, underwriting, and seeking to reduce claims against insurance and are not for the benefit of any insured or third party. The Insured is solely responsible for the safety of its property and operations and shall not rely upon any UNDERWRITING AND/OR LOSS CONTROL evaluations or activities to determine the safety of its property or operations and shall not diminish or forego its own safety practices and procedures.

I UNDERSTAND THAT ANY FALSE OR MISLEADING INFORMATION ON AN APPLICATION MAY BE SUBJECT TO CRIMINAL AND CIVIL PENALTIES.

I hereby represent and confirm that the above information, to the best of my knowledge, is true and correct and further certify that I have read all of the questions and answers of these applications.

IT IS UNDERSTOOD AND AGREED THAT THE COMPLETION OF THIS APPLICATION SHALL NOT BE BINDING EITHER TO THE PROPOSED INSURED OR TO THE COMPANY UNTIL ACCEPTED BY THE COMPANY OR COMPANIES IN WRITING.

_____

Signature of Regional Club Representative **Date**

PREMIUM CALCULATION

No. of Cars _____ x $1.00 each = _____
(Minimum Premium $100)

Make check payable and mail with signed application to:

Heacock Classic
P.O. Box 609
Burns, TN 37029

For additional information contact:
Bonnie Madden
bmadden@heacockclassic.com
Phone (800) 274-1804
Fax (615) 740-9087

Agent for MCA: Heacock Insurance Group, Inc.—CA License No.OB71868
Managing Agent: American Specialty Insurance & Risk Services, Inc.
Insurance Carrier: Philadelphia Insurance Company (Rated A+)