

Clowns Canada Application



Commercial General Liability Policy Exclusive to Association Members

Name of Applicant			
Clown Name		Clown Canada Association No.	
Mailing Address			
Telephone No.		E-Mail	
Policy Period	From: mm dd yy	To: mm dd yy	Exclusively: (at 12:01 Standard Time at the address of the Named Insured herein).
Underwriting Information			
Current Insurer		Policy No.	Expiry
1. Does the Applicant have other clowning related insurance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
2. Any losses during the past 3 years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If yes, describe:			
3. Do you use any henna products or live animals?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, please contact the broker to discuss
4. Has the Company cancelled or refused insurance during the past 3 years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If yes, give reasons:			
Coverage Information			
Limit of Insurance	Limits of Insurance		
Liability Limit	\$2,000,000		
Coverage Details	Including Bodily Injury and Property Damage • Products/Complete Operations Hazard • Advertising Injury Liability • Medical Expenses • Tenants Legal Liability \$250,000 • Non-owned Automobile Liability		
Subject To	Personal pursuits exclusion, abuse or molestation exclusion		
Deductibles	\$2500 - Bodily Injury/Property Damage • \$5000 - Advertising Injury • \$500 - Tenants Legal Liability		
Optional Coverage			
<input type="checkbox"/>	\$5000 limit / additional \$75 annually	<input type="checkbox"/>	\$10,000 limit / additional \$150 annually
Business Operations			
List and description of operations			
Total Annual Receipts		No of Employees	Additional \$50 annually per employee.
Filing Requirements			
Insured Signature		Date	
Broker Signature		Date	
Annual Policy Premium	\$150	Plus optional coverage if required + applicable tax (ON 8%, QC 9%, NL 13%)	
IMPORTANT: Premium is Pro-rated quarterly:	100% of premium from June 5-Sept 4 • 75% of premium from Sept 5-Dec 4 50% of premium from Dec 5-March 4 • 25% of premium from March 5-June 4		
Return application and cheque payable to:	HUB International Ontario Limited, 3063 Walker Road, Windsor, ON N8W 3R4		
Credit Card Payments:	Visa <input type="checkbox"/>	Master Card <input type="checkbox"/>	Card No. Expiry:
NOTE: Coverage commences when payment processed by Hub International. Certificate of Insurance will be forwarded.			

Angela Burns, Commercial Lines

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HUB International Ontario Limited 3063 Walker Road, Windsor, ON N8W 3R4

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