SWE Insurance Coverage for Sections, Regions, and MALs

SWE carries insurance coverage for region, section, and MAL standard events. You only need to fill out the Insurance Coverage Questionnaire if:

* You need proof of insurance
* You need to show coverage of “additional insureds”
* Your meeting or event falls outside of standard guidelines, such as:
* Tour(s)
* Length > 3 days
* Overnight stay
* Total attendance > 250 people (please count all people who will be attending regardless of their role)
* Outdoor activities
* Participants are middle school children (13 years old and younger) using power tools
* Inadequate student to chaperone ratio (varies - depending on age of children)
* Day camp
* Non-educational (e.g. fundraisers)

Some special events are included in SWE’s coverage and other special events may require an additional premium. SWE’s insurance carrier cannot provide specific criteria whether there will be a charge associated with an event. Each event has to be looked at on an individual basis.  
  
If any of the above pertains to your event, please fill out the coverage form and return it ASAP to marcia.lampela@swe.org. HQ will process your request and confirm coverage, provide a certificate of insurance, and/or quote if a premium is required. If a premium is required and you commit to paying the premium, then SWE will provide an invoice for documentation.  
  
You can find the latest version of these guidelines and form posted on the SWE governance site under Volunteer Forms.  
  
Region Conferences: In most cases, region conferences should not require an additional charge. For coverage of buses for tours or shuttles, please request the bus or shuttle operator add you as an additional insured.

Liquor: Liquor Law liability coverage is not provided by your insurance policy and we recommend that any alcohol be served by your hosting facility (hotel, conference center, restaurant, etc.).

Please direct any questions to [Philip.Thakadiyil@swe.org](mailto:Philip.Thakadiyil@swe.org).

SWE Insurance Coverage Questionnaire

Please complete the form below:

|  |  |
| --- | --- |
| NAME of the EVENT |  |
| ORGANIZATION |  |
| SECTION/REGION |  |
| MAILING ADDRESS |  |
| CONTACT PERSON |  |
| DAYTIME PHONE # |  |
| FAX NUMBER |  |
| EMAIL |  |

|  |  |  |
| --- | --- | --- |
| 1 | Describe Event: (Meeting, Convention, Trade Show, Seminar, Banquet/Reception, etc.) |  |
| Provide description of event activities: |  |
| 2 | Are you the sponsor? |  |
| If not, name of main sponsor: |  |
| 3 | Date(s) of event (including move-in/move-out): |  |
| 4 | Address of event: |  |
| 5 | Estimated Attendance: |  |
| 6 | Estimated Exhibitors: |  |
| 7 | Will children be attending? |  |
| What is the ratio of chaperones to children? |  |
| Will any children under age 14 be operating power tools? If so, please provide details. |  |
| 8 | Will the event be held indoors or outdoors? |  |
| 9 | Is there an overnight stay? |  |
| 10 | Admission to be charged: |  |
| Expected gross receipts: |  |
| 11 | Have you conducted similar events in the past? |  |
| Have there been any claims/losses in the past? |  |
| If yes, please describe: |  |
| 12 | Describe security to be provided: |  |
| Armed or Unarmed? |  |
| Provided by whom? |  |
| Provide copy of their Certificate of Insurance naming your organization as Additional Insured under their General Liability coverage. |  |
| 13 | Describe first aid to be provided: |  |
| 14 | Will there be amusement rides or fireworks? |  |
| 15 | Are exhibitors required by contract to carry their own liability insurance? |  |
| If so, will they be required to provide you with evidence of General Liability protection and Workers' Compensation Insurance? |  |
| 16 | Describe refreshments planned: |  |
| Will they be complimentary or purchased by guests? |  |
| How will they be provided? (Names): |  |
| Describe any cooking to be done: |  |
| If liquor is to be sold, list estimated receipts: |  |
| 18 | Is a Certificate of Insurance (COI) required by another party? |  |
| Additional Insured: |  |
| Name: |  |
| Address |  |
| 19 | Have you agreed to hold harmless any third parties? |  |
| If so, please describe: |  |
| 20 | Will you be promoting any seminars, meetings, conferences or special events during the convention/tradeshow? If so, please attach a brief description indicating the purpose and number of attendees. |  |
| 21 | Are tours included in your meeting or conference? If so, please provide description or agenda. |  |
| 22 | Will any attendees be operating machinery? If so, please provide details. |  |
| 23 | Is this for information purposes only? |  |

|  |  |
| --- | --- |
| **Signature** |  |
| **Date** |  |
| Notes |  |

If a contract or lease has been signed, please attach it.

PLEASE RETURN COMPLETED QUESTIONNAIRE TO:

Philip Thakadiyil

Vice President, Finance & Administration

[Philip.Thakadiyil@swe.org](mailto:Philip.Thakadiyil@swe.org)

Please allow ~2 weeks for processing of requests.

Rev. 8/24/2015