

ARCHDIOCESE OF CHICAGO

Department of Insurance and Risk
dturlek@archchicago.org



Post Office Box 1979
Chicago, Illinois 60690-1979

Phone: 312-534-8295
Fax: 312-534-9805

September 13, 2009

RE: **Special Events Program**

Dear Pastor:

The use of Catholic Bishop of Chicago, a Corporation Sole owned (Parish) facilities for non-sponsored events has increased over the past few years. As utilization increases, and lawsuits are an ever-increasing reality, we need to address the liability associated with offering Parish facilities for **non-sponsored activities**. To be considered a Parish/School sponsored group or activity, there are two basic tests:

1. The Pastor has the authority to start, direct, control, manage, expand, or eliminate the activities of the organization.
2. The Pastor has the authority to sign checks on the organization's checking account and receives the monthly statements.

When an organization requests to use your facility for an event that does not pass these basic tests, then the group is required to provide proof of insurance. In the absence of already having a Commercial General Liability insurance policy, the Archdiocese, in conjunction with its insurance broker, Arthur J. Gallagher & Co., offers an insurance program specifically designed to accommodate non-sponsored special events at the Parish level. In doing so, the Archdiocese reduces the exposure to its self-insured position. The Archdiocese acknowledges the Parish's role in providing facilities to its parishioners and the surrounding community. The addition of this coverage helps to provide the continued availability of these facilities.

Parishes that provide cake, coffee, or refreshments to the participants after baptisms and funeral masses are not required to have the family member complete a Special Events Packet. These events are considered Parish-sponsored activities. When a family member of these events requests the use of the facility for a private luncheon/dinner, a Special Events Packet must be completed by the user. An appropriate rental fee should be established.

Enclosed you will find a supply of applications to be completed for all requests to utilize the Parish facilities for events not sponsored by the Parish. Please photocopy any additional copies you require.

Examples of non-sponsored events (not all inclusive):

1. Wedding receptions, anniversary receptions, class reunions not sponsored by the school, and parties.
2. Workshops put on by non-Parish groups.
3. Local civic and social clubs.
4. Any non-athletic single or multiple day events.

Premium:

The cost per day varies based on the event type and amount of attendees. The premium charged for most, but not all, of our typical events will be \$270 per event.

Coverage:

Coverage is subject to the terms, conditions, and exclusions of the actual insurance policy. There is a \$1,000,000 per occurrence, \$2,000,000 per event limit for the outside user of the facility and Parish. The policy includes Host Liquor Liability.

Exclusions:

Certain policy exclusions apply. The base policy excludes aircraft (gliders, hot air balloons, parachutes, etc.), motor vehicles, intentional and criminal acts, amusement park rides and slides, fireworks, and participant liability for athletic events.

For events where liquor is being sold directly to the event participants and/or is included as part of the ticket price, the user must obtain a Statutory Liquor Policy, which is available for an **additional** \$300 payable by the user.

Administration:

Two weeks prior to the event, the Parish/User will need to perform the following steps:

1. Have the user complete the enclosed application including the Insurance and Hold Harmless Agreement, and provide it to the Parish Representative with the appropriate premium payable to the Parish.
2. Parish Representative faxes the application to Market Access.
3. A certificate of coverage will be faxed back to the Parish.
4. A copy of the certificate should be given to the user only when the balance of the remaining premium has been made.
5. Market Access will bill the Parish at the end of the month for the premium on the event.

All events will need to be reported and approved by Market Access two weeks before the event occurs. Not all events will be eligible for coverage. Some events will require additional information to underwrite; please complete the Referral Application. Questions on this process should be referred to Julia Seidel at Arthur J. Gallagher & Co. She can be reached at 630-285-3579. Please allow two weeks for completion and forwarding of certificates. We have attempted to streamline this process and have arranged for you to have direct contact with the insurance carrier. We made this change because it is very important that events are reported on a timely basis. In the past, some events were reported late or very near the event date. This has caused considerable difficulty with the insurance carrier.

It is the responsibility of the Parish to collect the premium from the tenant. We recommend you collect the funds before the event. Failure to pay Market Access will result in a surcharge on your parish billing statement and a disqualification from the use of the Special Events Program. Once the certificate is issued and the event occurs, any claims, accidents, or losses resulting from the event should be immediately reported to Market Access by calling 847-221-2100.

September 13, 2009
Page 3

Please notify in writing any known groups or organizations that are independent of the Parish/School that they should not utilize or reference the Parish or School name in their organization's name or in printed materials. Program participants will have the false understanding that it is a Parish-sponsored activity.

The rates and forms in this package are good through September 13, 2009. Please feel free to contact me at 312-534-8295 or dturlek@archchicago.org with any questions you may have.

Sincerely,

A handwritten signature in blue ink that reads "Don". The signature is stylized and cursive.

Don Turlek
Risk Manager

Archdiocese of Chicago Special Events Program Claim Reporting Instructions

IMMEDIATELY report any incident, claim, or suit regarding Special Events General Liability coverage to:

Fedota Childers
Attention: John Kuhn
Phone: 312-236-5015
Fax: 312-236-8559
E-Mail: jkuhn@fedotachilders.com

In order to expedite processing, a copy can also be sent to Nancy Anderson at Market Access:

Fax: 847-221-2520
E-Mail: nancy@mktacss.com

IMMEDIATELY report any incident, claim, or suit regarding Special Events Liquor Liability coverage to:

Market Access
Attention: Nancy Anderson
Fax: 847-221-2520
E-Mail: nancy@mktacss.com

**CATHOLIC BISHOP OF CHICAGO, A CORPORATION SOLE
Insurance and Hold Harmless Agreement**

| | |
|-----------------|--------------------|
| Facility User: | Date of Use: |
| Parish Name: | |
| Parish Address: | |
| Contact Person: | Telephone: () |

The facility user agrees to the extent allowed by law to protect, indemnify, save, and keep harmless the Catholic Bishop of Chicago, a Corporation Sole and

_____ Parish
against and from any and all loss, cost, damage, or expense arising out of or from any accident or other occurrence on or about said premises as a result of, incident to, occasioned by, or during the user's use, causing injury to person or property whomsoever and whatsoever; and will protect, indemnify, save, and keep harmless the above mentioned parties from any and all claims, costs, or expense arising out of any failure to comply with and perform all the requirements and provisions agreed to and required by any law or ordinance.

The user agrees to provide evidence of Commercial General Liability insurance with a minimum policy of \$1,000,000 per occurrence. The user agrees to name the Catholic Bishop of Chicago, a Corporation Sole, and _____ Parish as additional insureds. A certificate of insurance evidencing this should accompany this agreement. Failure to provide the evidence does not absolve the user of the obligation to procure this insurance. I agree to pay the associate premium for the required coverage and understand that the coverage may be cancelled for non-payment.

If alcohol (beer or wine) is to be served/sold, the certificate must evidence Host Liquor Liability/Dram Shop coverage. User will also obtain and pay for a liquor license. Hard liquor, spirits, and controlled substances will not be sold, served, or consumed on the premises.

The user acknowledges the facility has been demised out to him/her and the owner has no management, direction, or control over the event. The user is responsible for providing security services if required. The user will comply with all federal, state, and local laws, ordinances, regulations, and assumes responsibility for any violations. The user agrees to cooperate in any investigations or legal proceedings as required.

_____ Date

_____ Signed (Authorized Representative User)

SECTION II

PROGRAM INFORMATION

TYPE OF INSURANCE

Commercial General Liability

FORM

2004 ISO (CG 00 01 12 04) Occurrence

LIMITS

| | |
|------------------------------|-------------|
| Event Aggregate | \$2,000,000 |
| Products - CompOp Agg. | \$2,000,000 |
| Personal & Adv Injury | \$ 10,000 |
| Each Occurrence | \$1,000,000 |
| Fire Damage (Any one fire)\$ | 50,000 |
| Medical Payments | \$ 5,000 |

DEDUCTIBLE

None

COVERAGE

Combined Single Limit of Liability for Bodily Injury and Property Damage per Occurrence
Aggregate per Event
Host Liquor Liability

OPTIONAL COVERAGES *

*(subject to additional Premium)

Participant Accident / Injury
Statutory Liquor Liability

LIMITATIONS

Specific activities and/or locations

EVENTS WITH SPECIAL LIMITATIONS

Aircraft and Balloon Events (Prohibited)
Circuses (Prohibited)
Concerts - Rap & Heavy Metal (Call)
Fireworks & Pyrotechnics (Call)
"Go-Carts" (Prohibited)
Mechanical Amusement Devices (Call)
Motorized Sporting Events (Prohibited)
Sports Events not listed (Call)
Truck & Tractor Pulls (Prohibited)

LIQUOR LIABILITY

Host Liquor Coverage is included. However, if alcoholic beverages will be sold, included in the price of admission, or provided at a fund raiser Statutory Liquor Liability coverage must be purchased

EXCLUSIONS

Abuse, Molestation, assault & battery
Amusement Devices
Aircraft, Airports, Aviation types risks

Animals- exotic animals
- injury or damage caused by any animal
- damage to any animal
Automobiles/vehicular exposures
(Bodily Injury & Property Damage)
Bungee-related activities
Care, Custody or Control of Property
Concerts of a riotous or inflammatory nature,
creating civil disobediences
Cross Suits
Employment related practices
Firearms
Fireworks & Pyrotechnics
Fungi or Bacteria
Liquor Sales- (see *OPTIONAL COV.*)
Moshing, Stage-diving, Crowd-surfing,
and Slam-dancing
Pollution, Lead Paint, Asbestos & Mold
Punitive Damages
Performer/ & Athletic Participant Injuries
(see *OPTIONAL COVERAGES*)
Riot, Civil Commotion
Rodeos
Security Guards
Volunteers
War

RATES

- 1) For Tenant User Events
See Insurance Program Minimums
- 2) For Member Special Events -
submit Quote Request Form

NOTIFICATION FORMS

See attachments

IMPORTANT NOTE -

PLEASE REFER TO POLICY FOR SPECIFIC TERMS, CONDITIONS & EXCLUSIONS

ARCHDIOCESE OF CHICAGO

SPECIAL EVENT REFERRAL APPLICATION

1. Applicant: _____
Experience (describe in detail):* _____
2. Address: _____ City: _____ State: _____ Zip: _____ Phone: _____
3. Event: _____ Description:* _____
List entertainers who will perform:* _____
Location: _____ City: _____ State: _____ Zip: _____
4. Dates of coverage (incl. setup/tear down): _____ Opening/Closing hours: _____
5. Estimated attendance: _____ Ticket price: _____ Gross receipts (all sources): _____
6. Type seating: Assigned _____ Bleachers _____ Unassigned ("stadium seating") _____ Mixed _____
7. Will liquor/beer/wine be sold or fireworks displayed? _____ (If yes, the applicant must be named as an "Additional Insured" on the liability policy of the purveyor and provide a Certificate of Insurance before we will bind coverage.)
8. Estimated amount of other concession sales (food, souvenirs, crafts, etc...) _____
9. Describe security arrangements in detail:* _____
(Applicant must be covered by the Security firm as an Additional Insured and provide a Certificate of Insurance before we will bind)
10. If event is outdoors, describe methods used to prohibit entry by non-ticket holders:* _____

11. Describe medical facilities available for event:* _____
12. Attach a diagram of facility: (indicate event area, spectator areas, fences, stage(s), parking, adjacent buildings and other features)* _____

***ALL QUESTIONS MUST BE ANSWERED**

IF ADDITIONAL INFORMATION IS NEEDED FOR A MORE ACCURATE DESCRIPTION OF THE RISK, PLEASE PROVIDE A SEPARATE SHEET.

APPLICANT'S SIGNATURE: _____ DATE _____

ARCHDIOCESE OF CHICAGO

SPECIAL EVENT INSURANCE PROGRAM RATE FORM

\$2,000,000 PER EVENT AGGREGATE/\$1,000,000 OCCURRENCE

Coverage provided through "Certain Underwriters at Lloyds, London" - Best's Rating: A- Excellent

HOW IT WORKS.....

1) Select the event's classification from the following:

2) CLASS A - Banquets, Beauty Pageants, Bingo's, Graduations, Hikes, Marathons, Meetings (Business, Civic, Club, Lectures, Religious, Seminars), Shows (other than Concerts), Walk-a-thons

CLASS B - Social Gatherings, Dances, Parties (Anniversary, Birthday, Graduation), Picnics, Religious, Retirement, Reunions, Weddings, etc.

REFERRALS - (The following events require individual underwriting and pricing):
Concerts, Fairs, Festivals, Fund Raisers Parades, Political Meetings
Rallies, Recitals (Dance/Music) Sporting Events and any events not shown above.

3) Determine the Premium from the following chart:

NOTE: The Policy contains Host Liquor Liability; however, if alcoholic beverages will be sold at the event, are included in the price of admission, or provided at a "fund raiser", Statutory Liquor coverage must be purchased. (Subject to purchase of the Special Event Policy).

| <u>General Liability Policy</u> | | | |
|---------------------------------|--------------------------|------------------|-----------|
| 1 - 499 | CLASSES A & B | \$ 270 | Per Day * |
| 500 - 999 | CLASS A | \$ 298 | Per Day |
| 500 - 999 | CLASS B | \$ 355 | Per Day |
| OVER 1000 & REFER GROUP | | SUBMIT FOR QUOTE | |

OTHER CHARGES: \$52 per day: Set Up & Tear Down and/or "Approved" Amusement Devices (inflatables, moon bounces, dunk tanks, etc.) \$52 (each)

| <u>Statutory Liquor Policy</u> | | | |
|--------------------------------|--------------------------|------------------|------------|
| 1 - 500 | CLASSES A & B | \$ 300 | Per Day ** |
| OVER 501 & REFER GROUP | | SUBMIT FOR QUOTE | |

***PLEASE NOTE:** Includes premium (\$128), MAC fee (\$85 non-refundable), AJG Producer fee (\$40), Wholesaler (RPS) fee (\$10), Policy Deposit Repayment Fee to the Catholic Bishop of Chicago of \$2, plus Surplus Lines Taxes of 3.6% (\$5).

****** Includes premium (\$162), MAC fee (\$85 non-refundable), AJG Producer fee (\$40), and Wholesaler (RPS) fee (\$13).
In accordance with the Illinois Insurance Code it is required that the insured has full knowledge that he is being charged these fees. The signature below is acknowledgement of said charge.

REQUESTED BY: _____

4) Complete the Event Notification Form and Fax to Market Access @ 847-221-2520
If you have any questions please call Market Access at 847-221-2100

IMPORTANT: The coverage must be "Approved" by Market Access before it is effective.
Depending on the event, some coverage restrictions may apply (SEE MASTER POLICY).

Provide through the facilities of:

MARKET ACCESS
50 N. Brockway, Suite 3-2
Palatine, IL 60084
(847) 221-2100 Phone
(847) 221-2520 Fax

Archdiocese-EZ2009
(Terrorism option included)

ARCHDIOCESE OF CHICAGO SPECIAL EVENT PROGRAM

Coverage provided through "Certain Underwriters at Lloyds, London" - Best's Rating: A- Excellent
EVENT NOTIFICATION FORM

Complete and FAX TO (847) 221 - 2520

Please indicate: Binder Request _____ Quote Only _____

NAME OF PARISH _____

LOCATION(S) TO BE USED _____

FACILITY ADDRESS _____

APPLICANT (RENTER) _____

NAME ADDRESS PHONE #

PARISH CONTACT (Name, phone, email (if available) and fax number) _____

TYPE OF EVENT (give a description, including activities involved, live music or DJ, "approved" amusement devices (ie. inflatable moon bounce, dunk tank) etc.) _____

DATE(S) _____ START TIME _____ END TIME _____ EXPECTED ATTENDANCE _____

WILL THERE BE LIQUOR AT THIS EVENT? YES _____ NO _____
WILL LIQUOR BE SOLD OR INCLUDED IN THE PRICE OF ADMISSION? YES _____ NO _____
WILL INFLATABLE DEVICES BE USED? YES _____ NO _____
IS SET-UP AND/OR TEAR DOWN COVERAGE REQUIRED? YES _____ NO _____

NOTE: The Policy contains Host Liquor Liability; however, if alcoholic beverages will be sold at the event, are included in the price of admission, or provided at a "fund raiser", Statutory Liquor coverage must be purchased.

TO DETERMINE THE POLICY PREMIUMS SEE CHART

GENERAL LIABILITY POLICY PREMIUM: _____
STATUTORY LIQUOR POLICY PREMIUM: (if applicable): _____
OTHER CHARGES: (if applicable): _____

TOTAL COST

***PLEASE NOTE:** Includes premium (\$128), MAC fee (\$85 non-refundable), AJG Producer fee (\$40), Wholesaler (RPS) fee (\$10), Policy Deposit Repayment Fee to the Catholic Bishop of Chicago of \$2, plus Surplus Lines Taxes of 3.6% (\$5). In accordance with the Illinois Insurance Code it is required that the insured has full knowledge that he is being charged these fees. The signature below is acknowledgement of said charge.

REQUESTED BY: _____

APPROVAL _____ **BINDER NUMBER** _____ **DATE** _____

Market Access Authorized Signature

IMPORTANT "Binder Request" must be "Approved" by Market Access before coverage is effective

Provide through the facilities of:
MARKET ACCESS CORPORATION
(847) 221-2100 Phone