



# Exhibitorinsurance.com



ADMINISTERED BY  
BROKERS TRUST INSURANCE GROUP INC.

TRUSTED SINCE 1963

**Exhibitorinsurance.com** has a vast accessible resource base of qualified professionals, and contracts with key insurance companies.

**Exhibitorinsurance.com** presently services over 300 events annually. We take the time with our show organizations and exhibitors to continually improve **exhibitorinsurance.com**.

Your **exhibitorinsurance.com** team of professionals are ready to provide our service for your next event.



# Program Benefits



## For the Event Organizer

Each certificate of insurance will list the convention and trade show organizer as an additional insured, giving peace of mind and diminishing the potential for a claim being brought directly against the event organizer.

We provide the event organizer with the necessary order form to insert into the exhibitors manual.

A network of information will be made available to promote safety at the event and to educate the exhibitor on their responsibilities.

**exhibitor insurance.com** will provide other value added services at no cost to the event organizer. Ask us about our Risk Management Package available to our event organization.



# Program Benefits



## For the Exhibitor

Broad comprehensive coverage, generous limits, and competitive premiums all made possible by the massive buying power of thousands of exhibitors participating in this program.

Provide the exhibitor with the necessary order form (application) in the manual for quick response.

**exhibitor insurance.com** will provide online access for quick and easy ordering, obtaining insurance certificate, on-line payment and communications.

All claims made at the event site and covered by the **exhibitor insurance.com** program will be directed to our program and handled by a qualified team of designated adjusters with a convenient and accessible 1-800 number.



# Important

## Please take care of immediately!

RE: CERTIFICATE OF LIABILITY INSURANCE

As you may know, as an Exhibitor participating in a show, you must have adequate Liability Insurance with a minimum \$2,000,000 limit to protect the Exhibitors, the attending public, the show organizer and yourself.

Our insurance policy does not extend coverage to any exhibitors and requires you to submit a Certificate of Insurance with your signed exhibitor contract.

The results from a nationwide survey, has clearly indicated A CRITICAL FACT – some of the Exhibitors surveyed were in shows without insurance or with inadequate coverages.

There are two (2) ways to arrange the required insurance.

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### OPTION #1: With Exhibitorinsurance.com

(Show Management) has appointed “exhibitorinsurance.com” as the official insurance contractor for (Show) exhibitors.

The “exhibitorinsurance.com” program satisfies all of the Insurance requirements.

The “exhibitor insurance.com” application form is included in this package for your convenience or you can order online – [www.exhibitorinsurance.com](http://www.exhibitorinsurance.com)

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### OPTION #2: Your own Insurance Company

- Alternatively, you can have your insurance company prepare a certificate of Insurance which must have the following:
  - (Your Company name.) listed as an additional Insured
  - exact dates of the show: (Month/day/Year,)
  - Complete Address: (Your address including Postal Code)
  - Event name ( ) and address ( )
  - Comprehensive General Liability of \$2,000,000
  - Bodily Injury and Property Damage Liability
- Subject to \$1,000 (maximum) Bodily Injury & Property Damage deductible
- Deductible inclusive each occurrence
- Products and Completed Operations Liability
- Blanket Contractual Liability
- Contingent Employers Liability
- Broad form Property Damage
- Cross Liability clause
- Severability of Interest Clause

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**Note: Our office must receive your certificate of Insurance with the Exhibit space contract at least 30 days prior to the show set up date.** Your understanding and compliance with this is greatly appreciated and we thank you in advance, for ensuring the well being of all concerned. Have a prosperous and safe show.

Yours truly, Show Management



# Schedule of Coverages

## **Comprehensive General Liability – Limits of \$2,000,000, \$3,000,000 or \$5,000,000**

(as required for each event).

Bodily injury and Property Damage Liability,  
Subject to \$1,000 BI & PD Deductible.

Inclusive each occurrence:

- Products and Completed Operations Liability (\$2,000,000 aggregate limit)
- Personal & Advertising Injury (\$2,000,000 aggregate limit)
- Employees as additional insureds
- Volunteers as additional insureds
- Owners, Managers or Lessors of Premises as additional Insured

## **Tenants Legal Liability - \$250,000 limit**

Bodily injury and Property Damage Liability,  
Subject to \$1,000.

## **Medical Payments: \$5,000 any one person, \$50,000 aggregate**

## **Property – Exhibition Floater \$25,000**

Provides coverage for property of every description (broad form) while at the event and in-transit between the insured's business and the event – limited to Canada only (3 days before / after show). Coverage is provided on an actual cash value basis.

Maximum limit: \$25,000\*

Deductible: \$1,000

Premium: As per chart



# Exhibitors Insurance Application



**exhibitorinsurance.com**

**EXHIBITOR INSURANCE APPLICATION, CANADA**

**BROTHERS TRUST**  
INSURANCE GROUP INC.  
[www.brotherstrust.ca](http://www.brotherstrust.ca)

<b>APPLICATION INFORMATION</b>		Applicant Phone:		Applicant Fax:					
Name of Business:									
Mailing address:			City	Province/State	Postal Zip Code				
Email address - <b>REQUIRED TO RECEIVE INVOICE AND CERTIFICATE OF INSURANCE:</b>									
Describe in detail all products/services to be sold/offered by you at event:									
<b>EVENT INFORMATION</b>									
Name of Event Organizer (to be shown on certificate of insurance):			Event Name:						
Address Of Event Organizer:			Event Address:						
City	Province/State	Postal/Zip Code	City	Province/State	Postal/Zip Code				
<b>EVENT DATES</b> (Including Move In and Move Out):		FROM	dd	mm	yyyy	TO	dd	mm	yyyy
<b>SCHEDULE OF COVERAGES</b>									
<b>\$2,000,000 Liability Limits:</b> General Liability (Per Occurrence and Aggregate Limit), Products and Completed Operations, Personal and Advertising Injury, Fire Damage Limit - \$300,000. Medical Expense not included. Subject to \$1,000 BI, PD and Expenses Deductible.									
<b>\$25,000 Inland Marine</b> limit – covers your property while in transit to and from the Event Location (three days before and three days after the Event), and while on the Event premises. Subject to \$1,000 deductible.									
Coverage is subject to underwriting review. <b>Ineligible Risks:</b> Alcoholic beverages, Amusement Devices, Athletic performances and stunts, Body piercing and permanent tattooing on site, Chemicals, E-Commerce selling on site, Fertilizers, Firearms, Fireworks Sales & Displays, Pyrotechnics, Games, Installation, Services or Repairs of products on Site, Live Animals, Medical Testing, On-site Equipment Sales/Rentals, Oxygen/Aromatherapy Bars, Pesticides, Pharmaceuticals, Nutraceuticals, Vitamins, Health or Dietary Supplements, Time Share Sales, Tobacco Products, Licensed or Unlicensed Motorized Vehicles, Watercraft exhibits in water. <b>Note: There is no Liability coverage for Vehicles in Motion. Property excluded:</b> EDP (Electronic Data Processing), audio & video equipment, watches, jewellery made of precious or semi precious stones and/or precious metals, money, bullion, securities, stamps, antiques, furs, and fine arts.									
I hereby appoint Brokers Trust Insurance Group Inc. as my authorized representative for this program. I am applying for insurance based on the information provided above. I hereby declare that all of the above is true and correct. With respect to this application or any change in coverages, I authorize you to collect, use and disclose information as permitted by law for the purposes necessary to assess the risk, investigate and settle claims, and detect and prevent fraud, and analyzing business results.									
Please Print Your Name:			Signature:		DD	MM	YYYY		
The above insurance program will only be offered if the application form is signed and completed in full, and the payment and the application form are received in our offices prior to the opening show date. Completion of this application does not automatically bind coverage. We reserve the right to review all risks following online binding for underwriting compliance. <b>Premium and fee are minimum, retained and fully earned.</b> No refunds. Coverage is void if payment is returned N.S.F. NSF fee of \$50 will apply. A full copy of this policy is available upon request or online at <a href="http://www.exhibitorinsurance.com">www.exhibitorinsurance.com</a> . A copy of the certificate is available to your Show Organizer upon their request.									
<b>PAYMENT INFORMATION:</b> In CAN Funds					* Higher limits available for an additional premium				
Please Select			<input type="checkbox"/> Liability Only		<input type="checkbox"/> Liability + Property <b>\$25,000*</b>				
<input type="checkbox"/> Preferred Rate	Payment received at least 14 days before show		Premium \$46 + Fee \$109.32 + RST = <b>\$159</b>		Premium \$71 + Fee \$118.32 + RST = <b>\$195</b>				
<input type="checkbox"/> Regular Rate	Payment received 13 days or less before show		Premium \$46 + Fee \$125.32 + RST = <b>\$175</b>		Premium \$71 + Fee \$133.32 + RST = <b>\$210</b>				
TOTAL			SCAN		SCAN				
<b>Payment type:</b>			<input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express		Card#		Expiry Date		
If mailing a cheque, please remit payment to:			(The payment due on the Credit Card statement will be in the name of <a href="http://www.ExhibitorInsurance.com">www.ExhibitorInsurance.com</a> )				mm yy		
<b>Brokers Trust Insurance Group Inc.</b> 434 North Rivermede Rd. Suite 3, Concord, ON L4K 3M9 Phone: 905-695-2971 Fax: 905-760-2260			Name of the Credit Card Holder:						
			Fill in your credit card billing address if it is different from mailing address above, to process your payment:						
			Date: / /		Cardholder Signature				
I agree to pay above total according to my card issuer agreement.									



Download Exhibitors Insurance Application at [www.exhibitorinsurance.com](http://www.exhibitorinsurance.com) and **FAX** the completed application to **905-760-2260**

**exhibitorinsurance.com**

# Did You **Know?**

The event organizer is the custodian of the event and has an independent duty to ensure all exhibitors have adequate Liability Insurance.

A third party has cause of action against the organizer when an inadequately Insured exhibitor is negligent causing injury and or property damage.

Hold Harmless agreements in no way affects the public's right to sue the vendor, event organizer, or both, for damages an attendee sustains at the event.

A national survey conducted, clearly indicated up to 49% of exhibitors do not have adequate coverages.

## **Popular misconceptions exhibitors have are:**

- ▶ *The event organizer Insurance covers them*
- ▶ *Liability coverage relates to losses to their own property*
- ▶ *Their current Insurance policy automatically covers them at the exhibition.*

**exhibitor insurance.com** offers a Win-Win solution to this exposure at no cost to the organizer and at lower rates than the exhibitor could arrange on their own.

