



WILSON M. BECK
INSURANCE GROUP

Form B—SPECIAL EVENTS QUESTIONNAIRE
District 5060
RENTED/BORROWED EQUIPMENT & INVENTORY

Club Name: _____

Contact Person: _____

Contact Phone Number: _____

Contact Fax Number: _____

Contact Email: _____

Date of Event: _____

Description of Event: _____

Location of Event: _____

Start Time of Event: _____

Finish Time of Event: _____

Description of Rented/ Borrowed Equipment _____

ITEM	REPLACEMENT VALUE
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Where will the equipment be stored when not being used? _____

What is the maximum value of inventory (Liquor & Food supplies) that could be on site at any time? _____

Date Submitted _____ Contact Person Signature _____

Please print this application, complete it and fax it or email it back to our office.

If you have any questions or concerns please contact:

The Wilson M Beck Rotary Insurance Team @

rotary@wmbeck.com

Tel: 236-425-1770