

## Event Registration Insurance | Application Form

Online Registration Provider:			
<b>Event Organiser Entity Name:</b>			
Event Name:			
Event Date:	ı	Date Registrations O <sub>l</sub>	pen:
Event Location:			State:
City: Postcode:			
Est. Number of Participants:			
Event registration costs	Example:		
(if more than 7 registration options/ costs, please attach a	Half Marathon		
	\$150 (inc GST)		
spreadsheet)			
Event Website:			
e a la l			
Event organiser contact			
Event organiser contact  Name:			
-	E	Email:	
Name:	plicable	Email:	
Name:  Number:  Has your event received all ap	plicable permits)	/ES	)etails
Name:  Number:  Has your event received all ap approvals? (eg. council/shire p	plicable permits)	/ES	Petails
Name:  Number:  Has your event received all ap approvals? (eg. council/shire p	plicable permits)	/ES	Details
Name:  Number:  Has your event received all ap approvals? (eg. council/shire p	plicable permits)	/ES	Petails
Name:  Number:  Has your event received all ap approvals? (eg. council/shire p	plicable permits)  Year Number	/ES	
Number:  Has your event received all ap approvals? (eg. council/shire p Has this event been cancelled or abandoned in the past?	plicable permits)  Year Number	/ES  Incurred cost	