



SPECIALTY

INSURANCE AGENCY

Performers of the U.S. Santa Insurance Application

Mailing address: 3432 Denmark Avenue #231, Eagan, MN 55123

Phone: 715-246-8908 **Fax:** 715-246-8908 **Email:** info@specialtyinsuranceagency.com

General information:			
<input type="checkbox"/> I am a new account <input type="checkbox"/> I am renewing my coverage			
First name:	M.I.	Last name:	
Performer name/business name:			
Policy change for those with Inc or LLC in their dba as of 4/1/2025: Our carrier has informed us they will no longer accept dba's with LLC or Inc at the end, even if it's for a sole proprietor. This is because including Inc or LLC could elude coverage being extended to employees, board members, or others involved with the business, which this policy does not. Nothing in the policy has changed (it's always been an individual policy that insures one person), but they would like to prevent increased legal fees should someone argue there's additional coverage because of the addition of Inc or LLC.			
Birth date:	U.S. mailing address:		
City:	State:	Zip code:	
Home phone:		Cell phone:	
Email address:		Website:	
Requested start date:			
We cannot backdate insurance. Select a date in the future (tomorrow or further out). If you're mailing in your application, please allow 1.5 – 2 weeks for it to arrive. You may also submit this application via email to info@specialtyinsuranceagency.com or fax to 715-246-8908. Rush, same-day service available upon request.			
Operations not eligible:			
Trackless trains, moonwalks, jump houses or other amusement rides and attractions, black henna, grandstand bleachers, hypnotists, performing with animals (note: magicians are allowed to perform with rabbits and doves), or high-risk motorized activities. Audience member participation is not allowed with whip cracking. Use of gun powder is not allowed.			
Performance description (attach additional pages if needed):			

Annual gross revenue from previous year (performing revenue ONLY):				
<input type="checkbox"/> Up to \$35,000	<input type="checkbox"/> Up to \$100,000	<input type="checkbox"/> Up to \$200,000	<input type="checkbox"/> Up to \$300,000	<input type="checkbox"/> Up to \$400,000
Note: If you make over \$400,000 you are not eligible for this insurance program. Please contact our office for other options.				

Select your general liability limits of coverage:
Coverage starts on November 1 and goes until December 31. Please note, the Santa Policy covers you plus one assistant . Check the box for Option 1 or Option 2 limits of coverage you need based on the number of events you do per year . Events per year are from the previous year.

Commercial General Liability Coverage	Option 1 limits	Option 2 limits
Each occurrence	\$1,000,000	\$3,000,000
General aggregate	\$2,000,000	\$5,000,000
Products-completed operations aggregate	\$2,000,000	\$5,000,000
Personal and advertising injury	\$1,000,000	\$3,000,000
Damage to rental property (fire legal liability)	\$300,000	\$300,000
Medial expense	\$5,000	\$5,000
Deductible	Zero	Zero
Premium cost – annual coverage		
<input type="checkbox"/> Santa Policy	<input type="checkbox"/> \$195	<input type="checkbox"/> \$299
Commercial General Liability premium total:		\$

Performer assistant(s) – optional coverage:	
Please note, the Santa Policy comes with one assistant. This can be Mrs. Claus, an elf, reindeer, photographer, etc. Only fill out this section if you need additional assistants. An assistant cannot be another performer. The duties of an assistant can be as follows: Works with the insured for set-up and tear down, helps with planning and organization of a show or booking, works with contracts, coordinates permits, requests additional insured certificates, handles prop changes during the show, assists with crowd control, staged spectator called upon to assist with an act, acts as a safety coordinator. Key to this coverage: An assistant is a low-risk personnel that would not stop the show from going on if they weren't there.	
Assistant description (attach additional pages if needed): 	
Number of assistants you need the policy to cover (\$100 per assistant):	
Performer Assistant premium total:	\$

Inland Marine (business personal property) – optional coverage:		
Inland Marine will cover your business personal property (equipment and costumes) and goods while stored, in transit to/from a show, or while at a show for damage or if stolen.		
Inland Marine – business personal property	Option 1 limits	Option 2 limits
Coverage limits	\$10,000	\$25,000
Deductible for ALL losses	\$500	\$500
Premium cost	<input type="checkbox"/> \$242	<input type="checkbox"/> \$455
List your business personal property below (attach additional pages if needed):		
Inland Marine (business personal property) premium total:		\$

Sexual Abuse and Molestation (SAM) – optional coverage:		
Many schools in California and Illinois require that you carry Sexual Abuse and Molestation (SAM) coverage in addition to your general liability coverage before they permit you on the school grounds. We offer two different coverage limits. Please note, Option 2 is only available in California and Illinois.		
Commercial General Liability Coverage	Option 1 limits	Option 2 limits (CA/IL only)
Each occurrence	\$100,000	\$1,000,000
General aggregate	\$300,000	\$2,000,000
Premium cost	<input type="checkbox"/> \$150	<input type="checkbox"/> \$750
Sexual Abuse and Molestation (SAM) premium total:		\$

Final premium totals:	
Commercial General Liability	\$
Performer Assistant - optional	\$
Inland Marine (business personal property) – optional	\$
Sexual Abuse and Molestation (SAM) - optional	\$
Total cost due now:	\$

Payment methods:

Check: Please make checks payable to Specialty Insurance Agency. Mailing address: 3432 Denmark Avenue #231, Eagan, MN 55123.

Card: There is a 3.25% processing fee when paying by credit card. Once completed, email your application to info@specialtyinsuranceagency.com or fax it to 715-246-8908. Once you've sent your application over, give our office a call to pay with a card over the phone. Alternatively, you can complete the online application and pay by card that way.

Read and sign:		
<i>This is an application for membership. This application provides a brief outline of coverage. Coverage is subject to all terms, conditions, and exclusions stated in the insurance policy which can be viewed from your online client dashboard.</i>		
Applicant signature:	Printed name:	Date:

Requesting additional insured certificates:

Some venues require in their written contract that they be named as additional insured prior to you starting your job. There is no charge for naming a venue where you are working as an additional insured, but you do need to submit a written request for a certificate. To submit a certificate, via online through the website or by completing this form and submitting:

- Online through your client dashboard at www.specialtyinsuranceagency.com.
- Email this form to info@specialtyinsuranceagency.com.
- Fax this form to 715-246-8908.
- Mail this form to 3432 Denmark Avenue #231, Eagan, MN 55123.

Event/venue name (required):

Attention to person:

Event/venue address (required):

City (required):

State (required):

Zip code (required):

Fax to:

Email to:

Event date (required):

Additional insured wording (please refer to your contract if special wording is required):