



APPLICATION FOR SPECIAL EVENT COVERAGE

Form **MUST** be **DOWNLOADED** and **SAVED** before completing

Please email completed form to CMG@cdop.org

NOTE: Catholic Mutual Group **MUST** receive the application at least **15 days prior** to the event. **DO NOT SUBMIT** application more than **6 months** before the event.

COVERAGE LIMIT: \$1,000,000 Combined Single Limit Bodily Injury and Host Liquor Liability; \$500,000 Property Damage Liability. Coverage provided is per event, not per claim. **Submission of application does not bind coverage – ALL events are subject to approval.** Coverage is underwritten by Markel Insurance Company; policy number on file with C.M.G. Agency, Inc.

Parish, School, or Newman Center – NOT BUILDING NAME			Date event begins (m/d/yyyy)	Date event ends (m/d/yyyy)
Physical Address (NO PO Box)			Time event begins (AM/PM)	Time event ends (AM/PM)
City/State	Zip Code	Phone with Area Code	Type/Name of Event	
Parish, School, or Newman Center Email			If fundraiser , be specific about what is occurring	
Name of organization, person or persons requesting coverage				
Contact person for event			Approximate # of Participants	Is this an OVERNIGHT event? Yes No
Street Address			Is food being served?	Yes No
City / State	Zip Code	Phone with Area Code:	Is liquor being served?	Yes No
Organization or contact person's email (NOT location's email)			Are inflatables being used?	Yes No
ADDITIONAL CHARGES WILL APPLY FOR: - Events more than 3 days (charges to be determined) - Inflatable amusement devices – minimum charge of \$100 per device applies; MUST be pre-approved; pictures and description of each device required; each device is underwritten; charge is determined by size and potential risk. - Events that exceed 1,000 in attendance (charge to be determined)			MAKE CHECKS PAYABLE TO: DUNNE PROPERTY, N.F.P. \$125 per event \$150 per overnight events MAIL to: SPECIAL EVENTS Catholic Diocese of Peoria 419 NE Madison Avenue Peoria, IL 61603	
COVERAGE DOES NOT APPLY TO CERTAIN EVENTS, SUCH AS, BUT NOT LIMITED TO: - Any Carnival Event - Fireworks & Fireworks displays - Events involving "BYOB" (bring your own bottle) - Events involving pool or lake activities - Organized sporting events, including tournaments & camps - Events organized or operated by professional promoters/performers - Events where a fee or admission is charged, unless all proceeds go to charity - Amusement rides, including mechanically operated devices, trampolines, & rebounding devices. - Events involving recreational vehicles - Events with attendance of more than 1,000 people - Non-religious musical performances/concerts (contact us for special exceptions) - Political Rallies - Claims related to an epidemic/pandemic				

IN THE EVENT OF A CLAIM, PLEASE CONTACT C.M.G. AGENCY CLAIMS DEPARTMENT: 800-228-6108



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Parish, School, or Newman Center – NOT BUILDING NAME ABC Parish			Date event begins (m/d/yyyy) 1/1/2025	Date event ends (m/d/yyyy) 1/1/2025
Physical Address (NO PO Box) 619 Smith Avenue			Time event begins (AM/PM) 12:00 pm	Time event ends (AM/PM) 8:00 pm
City/State Anywhere, IL	Zip Code 61350	Phone with Area Code (309) 555-0000	Type/Name of Event birthday	
Parish, School, or Newman Center Email abcparishoffice@gmail.com			If fundraiser , be specific about what is occurring	
Name of organization, person or persons requesting coverage Jane and John Doe				
Contact person for event Jane Doe			Approximate # of Participants 40	Is this an OVERNIGHT event? ☐ Yes ☒ No
Street Address 123 Washington Circle			Is food being served? ☒ Yes ☐ No	
City / State Anywhere, IL	Zip Code 61350	Phone with Area Code: (309) 555-0001	Is liquor being served? ☐ Yes ☒ No	
Organization or contact person's email (NOT location's email) johnNjanedoe@gmail.com			Are inflatables being used? ☐ Yes ☒ No	
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