



AUTHORIZING SIGNATURES

By signing the Special Event Checklist, the Chapter is complying and adhering to the guidelines presented within the form.

*President: _____
 Signature: _____ Date: _____

Treasurer: _____
 Signature: _____ Date: _____

Vice President: _____
 Signature: _____ Date: _____

Risk Management Officer: _____
 Signature: _____ Date: _____

*Event Chairman: _____
 Signature: _____ Date: _____

*Advisor (College Chapters Only): _____
 Signature: _____ Date: _____

***Required signatures for College Chapters. The checklist will not be accepted nor processed if all required signatures are not listed.**

Before submitting, please remember to include the following items:

- Any additional insured entities to be included on the policy
- All written contracts or agreements with vendors or suppliers
- Include **ALL** certificates of insurance from the participating vendors or suppliers
- Proof of A.M. Best rating for each insurance carrier of participating vendors or suppliers
- Collect Athletic Participation Waivers from attendees (if applicable)
- Include copy of flier/promotional materials for requested event
- Required signatures from chapter officers

The Special Event Checklist must be submitted to the Corporate Headquarters via the online application form **(30 days) prior to the event**. Failure to submit this form within the appropriate time frame will be subject to a **late processing fee of \$100** and could result in the certificate not being processed in time for the event as well as additional approvals being required. **Forms received five (5) days or less before the event will not be processed.**

Please review the Insurance Manual on the National Website at www.apa1906.net for additional questions.