

SIGMA TAU GAMMA FRATERNITY INSURANCE AND CLAIM MANUAL



**EFFECTIVE FOR THE ANNUAL TERM:
2018 - 2019**

TABLE OF CONTENTS

Introduction.....	Page 3
General Liability Insurance Program.....	Page 4
What Does Our Coverage Include?.....	Page 4
Limits of Coverage	Page 5
Who Is An Insured?.....	Page 6
Who Is Not An Insured Under This Policy?.....	Page 6
Adding Additional Insureds.....	Page 6
What Does Our Coverage Not Include?	Page 7
Legal and Illegal Activity.....	Page 7
Special Events.....	Page 8
Lawsuits.....	Page 8
Safe Transportation Recommendation for Chapter Functions.....	Page 9
General Liability Claims.....	Page 11
Incident/Claim Reporting.....	Page 11
Other Insurance Coverage	
Member Accident Protection Program.....	Page 12
Optional Insurance Coverage	
Property.....	Page 13
Worker’s Compensation.....	Page 13
APPENDIX	
Fraternal Property Management Association Application.....	Page 15
Liability Incident/Claim Reporting Form	Page 18
Special Event Checklist	Page 19
Additional Insured Request Form	Page 21
Athletic Event Participation Waiver.....	Page 23
Definitions	Page 24



INTRODUCTION

The purpose of this manual is to give you an understanding of insurance coverage provided and information to properly report all actual and potential liability claims with which you may become involved.

The final responsibility for the success of the insurance program rests with Sigma Tau Gamma Fraternity and its chapters. It is always important to remember our first line of defense in liability matters is loss prevention, next is loss control, and the insurance contract is the final line of defense. The undergraduate and alumni members' willingness to understand and assume the responsibility of sound risk management practices is a cornerstone of our program.

In the event an incident or claim does arise, Vanessa Ryan, Interim Chief Executive Director of Sigma Tau Gamma, and Creative Risk Solutions (CRS), will oversee the effective handling of incident and claim investigation that arises during the policy year. Included within this manual you will find an incident reporting form that must be completed and submitted at the time of any incident that results in bodily injury or property damage.

Holmes Murphy strives to provide risk management resources to complement the loss prevention and control efforts of its clients. Please visit: www.holmesmurphyfraternal.com to review the Holmes Murphy website. You will find many risk management resources that can assist you in your daily lives as well as information on your insurance protection and online forms for: purchasing property coverage, liability and property claim reporting and making requests for additional insured protection.



SIGMA TAU GAMMA

THE GENERAL LIABILITY INSURANCE PROGRAM

The following description is a summary only and is not intended to serve as a substitute for the actual insurance contract.

The Sigma Tau Gamma Fraternity insurance program provides Blanket Public General Liability Coverage with the following carrier, policy period and limits of coverage.

Primary Insurer:	Landmark American Insurance Company
Policy Period:	October 1, 2018 to October 1, 2019

Insured Group

All Recognized Undergraduate Chapters,
Colonies, Alumni Assoc. & House Corporations

Limits of Coverage

\$100,000 per occurrence
\$200,000 Aggregate per Location

(Types of coverage are included at the end of this section).

Note: Cost of legal defense continues to be paid for policy insureds involved in litigation even after erosion of the per occurrence limit shown above. Cost of legal defense is unlimited. Individual policy insureds (e.g. Chapter Advisors or House Corporation officers) who are named in litigation due to no fault of their own are customarily dismissed quickly from litigation. In the unusual case where the individual insured would not be dismissed, the fraternity insurance policy continues to pay their defense until their dismissal or settlement of the case.

The coverage is for bodily injury, property damage and personal injury. This protects the local undergraduate chapter, its officers and members, house corporations, alumni associations and chapter related educational foundations including appointed volunteers, from claims arising out of bodily injury and property damage occurring out of chapter operations. It also protects against claims arising out of libel, slander, false arrest, invasion of privacy, eviction from the premises, and consumption of food and beverages and incidental malpractice.

Sigma Tau Gamma Fraternity Coverage includes:

- 1. COMMERCIAL GENERAL LIABILITY**
Covers liability arising out of Fraternity premises and operations.
- 2. PRODUCTS/COMPLETED OPERATIONS LIABILITY**
Covers preparation and consumption of food and beverages.
- 3. PERSONAL INJURY & ADVERTISING INJURY**
Covers libel, slander, defamation of character, false arrest, detention, malicious prosecution, wrongful entry or eviction, invasion of privacy.



4. CONTRACTUAL LIABILITY COVERAGE

Under certain circumstances, the liability coverage of Sigma Tau Gamma Fraternity insurance contract is extended to protect other parties with whom a Sigma Tau Gamma Fraternity chapter may enter into a contractual agreement. No contract should be signed by any entity/chapter of Sigma Tau Gamma Fraternity, without complete understanding of liabilities being assumed and insurance coverage, if any, that is provided. When any questions arise, please contact your chapter advisor or the National Headquarters of Sigma Tau Gamma Fraternity.

5. WATERCRAFT LIABILITY

Covers hired and non-owned boats/watercraft providing it is less than 52 feet in length.

6. INCIDENTAL MEDICAL MALPRACTICE

Covers liability that arises against an insured chapter or an individual who provides emergency medical care for injuries on or off our premises.

7. HIRED AND NON-OWNED AUTO

This applies to the situation when a chapter member, chapter employee, or volunteer alumnus driving his own car on fraternity business is involved in an accident. It is intended to only cover entities of Sigma Tau Gamma Fraternity and individuals not involved in the accident. The intent is not to provide auto liability coverage to those who are not prudent enough to purchase their own auto liability policy or ensure the vehicle they are operating has ample coverage to protect their interest. The auto insurance of the driver or auto owner will be the primary insurance coverage.

8. DAMAGE TO PREMISES YOU RENT

This is not a substitute for property insurance. Damage to Premises You Rent Liability Coverage provides coverage for liability arising against your Fraternity out of fire damage to a non-owned premise rented for any period as well as other damage to a premise you rent for 7 or less days.

9. WORLDWIDE COVERAGE

Coverage worldwide for suits brought in the United States.

10. HOST LIQUOR LIABILITY

Provides coverage when providing alcoholic beverages at no charge to those of legal drinking age. If you are found to be in the practice of manufacturing, distributing, selling, serving or furnishing alcoholic beverages, or if minors are involved, your coverage and protection is jeopardized.

Limits of Coverage

Insured Entity	Insurer	Bodily Injury & Property Damage Per Occurrence Limit	Policy Aggregate	Policy Aggregate Applies Per Location?
Undergraduate Chapter, Alumni Chapter, & House Corporation	Landmark American Insurance Company	\$100,000	\$200,000	Yes



Who Is An Insured?

The insurance coverage will pay claims for the following organizations and/or people:

- A. The local undergraduate chapter that is chartered and recognized by the Fraternity **when it obeys the laws** of the institution, city, county, state and country in which it operates and the policies of Sigma Tau Gamma Fraternity. Undergraduate chapter officers, executive committee, committee chairman and members while performing the duties of elected or appointed positions within the organization.
- B. All volunteer advisors while performing the duties of their appointed or elected positions.
- C. The house corporation while the directors are performing their duties as corporate officers.
- D. Alumni Associations registered with Sigma Tau Gamma Fraternity Inc., having paid the Risk Management Fee and chapter related educational foundations, its officers, and appointed volunteers while performing the services of their positions.
- E. Alumni Advisors while performing the duties as advisor

Who Is *Not* An Insured Under This Policy?

- A. Any individual member, alumnus, trustee or advisor who is performing tasks outside of his responsibility (i.e. spontaneous social function planned by an individual member, chapter advisor consuming alcohol with undergraduates, hazing of members, etc.)
- B. Any member who's illegal or intentional actions result in death or injury to an individual or property damage.
- C. Any insured(s) that participate, supervise or direct others to participate in the excluded acts of Assault and Battery. Sexual Abuse or Molestation, or Hazing. "Participate" means to take part in an excluded activity, whether as a direct perpetrator of the excluded activity or as an observer of such activity. "Participate" also means to have knowledge of the excluded activity and fail to aid or respond to the care of anyone injured as a result of the excluded activity.
- D. Members' parents or family members and guests of chapter members.
- E. College/University administration (see Adding Additional Insureds below).

Adding Additional Insureds

Additional Insureds may be added to this policy. Such Additional Insureds may be your landlord, college, university and/or proprietor from whom the chapter may be renting property for a special event.

Please submit the Additional Insured Request Form found in the Appendix to: Sigma Tau Gamma Fraternity Headquarters, 8741 Founders Road, Indianapolis, IN 46268-1338 Phone: 660.747.2222, or email: slatour@sigmataugamma.org at least (30) thirty days prior to the date it is needed.

Upon review and approval of the Additional Insured request by Sigma Tau Gamma Fraternity and the insurance carrier, a certificate of insurance will be issued by Holmes Murphy with the original forwarded to the Additional Insured and a copy to the National Headquarters.

***Proper function planning is critical to completing any Special Event in a safe manner!
Please utilize the Special Event Checklist in the Appendix to assist with your event planning.***



What Does Our Coverage *Not* Include?

- A. Any claim of bodily injury and/or property damage from an incident resulting when:
1. An illegal act was committed.
 2. An intentional act was committed.
 3. A contract made by the chapter is broken.
 4. There is any discharge, release or escape of smoke, vapors, soot, fume, acids, toxic chemicals, etc. upon land, the atmosphere or any water course or body of water.
 5. An employee is hurt on the job. Workers' Compensation coverage must be purchased.
- B. Any claim of property damage to property owned by, rented by, used by, or cared for by the chapter. For example, the chapter rents a portable generator for an outdoor function, and while it is in the care, custody and control of the chapter, it is damaged and the lesser holds the chapter responsible and liable. No coverage is available under Sigma Tau Gamma Fraternity liability insurance contract. The only exception would be a premise rented for 7 or less days in which the Damage to Premises You Rent limit would apply.

Legal and Illegal Activity

Simply stated, no insurance policy in the world provides coverage for violations of the law. The Sigma Tau Gamma Fraternity insurance program is no exception to this rule. The key points to understand are:

- Compliance with federal, state, local and institutional (college or university) laws and regulations is required.
- Compliance with all regulations and policies of Sigma Tau Gamma Fraternity is required.

Those individuals who choose to violate these rules may void the protection for themselves under Sigma Tau Gamma Fraternity insurance program. Every effort has been made to avoid their actions from jeopardizing the other members, other entities, or other named insureds protected by Sigma Tau Gamma Fraternity program. The following brief examples are intended to provide illustration and do not represent legal advice.

- A. With the broad awareness of its membership, the chapter serves alcohol to a minor in violation of the law at a chapter sponsored function. In the event of an injury, claim or lawsuit, those persons found to be in violation of the law and/or Sigma Tau Gamma Fraternity (in this case the entire chapter) most likely would be without insurance protection. The other named insureds would be protected (i.e. National Fraternity, or volunteer alumni).
- B. A few members of a 65-man chapter cause injury to someone relating to a hazing incident. In the event of a claim or lawsuit, the chapter and members could be in violation of the law and Sigma Tau Gamma Fraternity policies, and would be without insurance protection. The other named insureds and other volunteers would be protected so long as they did not violate fraternity policies or the law.

Great effort has been made to ensure coverage will be provided to those individuals and entities exposed to claims due to no fault of their own. The intent is to provide coverage for claims that arise from ordinary negligence. Chapter advisors are protected from the unauthorized actions of their individual chapter members and the chapter, as are the chapter foundations and all other appointed alumni volunteers involved with the Fraternity.

All questions regarding insurance interpretation and coverage should be directed to:

Holmes Murphy
13810 FNB Parkway, Suite 300
Omaha, NE 68164

Jeannie Gilmore, Client Service Consultant
Phone: 402.898.4198 or 800.736.4327 Ext 4198
Fax: 800.328.0522
E-Mail: JGilmore@holmesmurphy.com

Rohnda Roehrs, VP Client Services
Phone: 402.898.4185 or 700.736.4327 Ext.4185
Fax: 800.328.0522
E-Mail: RRoehrs@holmesmurphy.com

SIGMA TAU GAMMA FRATERNITY
INSURANCE AND CLAIM MANUAL



SPECIAL EVENTS

In general, Special Events sponsored by a Chapter are covered under the general liability policy.

Poorly planned Special Events (e.g. social functions) are the usual cause of injury to our members and their guests. Proper planning is critical to the success of the event, avoiding injuries and controlling the costs of insurance protection.

We encourage Alumni Advisors and other volunteers to be engaged with the undergraduate chapters in the proper planning of Special Events. A Special Event Checklist is included in the Appendix. If the form is utilized, and all sections are addressed, the guidance provided by the Checklist can do a great deal to help avoid an injury from occurring.

Special Note:

Whenever chapters or members are transporting special event attendees, **personal vehicles should not be used**. Chapters should be encouraged to engage a licensed third-party transportation vendor who will provide professional drivers. The transportation company assumes liability during the ride and removes the responsibility and risk from Sigma Tau Gamma Fraternity.

LAWSUITS

There will be occasions when lawsuits may be served on a member of your chapter. As there is only a limited time to answer a lawsuit, the following procedure applies:

- a. Treat any potential or actual claim or lawsuit as a high priority item and immediately notify National Headquarters by phone.
- b. Utilizing the enclosed incident reporting form, note all relevant information.
- c. Forward the suit or incident report via email to Vanessa Ryan, Interim Chief Executive Director, Sigma Tau Gamma Fraternity, National Headquarters, at: vryan@sigtau.org. If you do not have access to email, overnight the papers to Sigma Tau Gamma, 8741 Founders Road, Indianapolis, IN 46268-1338. It is very important the claim or lawsuit be sent immediately.



SAFE TRANSPORTATION RECOMMENDATION FOR CHAPTER FUNCTIONS

Liability exposure continues to be one of the biggest challenges facing men's general fraternal organizations. In fact, the exposure threatens the continued existence of many organizations. Sigma Tau Gamma Fraternity recognizes this and is attempting to provide the broadest general liability coverage available to us; however, we cannot do it without the support of the entire organization. It is important that sound risk management practices endorsed at the National level are implemented and strictly followed at the chapter level.

The safe use of automobiles is critical to the well-being of all Sigma Tau Gamma members. We request each chapter and provisional chapter implement a policy eliminating the use of:

1. Members' vehicles for transportation of members and guests from fraternity functions in programs such as the designated driver.
2. Leased or rented vehicles operated by members to transport members and guests from fraternity functions.

We understand that each of the above referenced precautions is done with the best intentions, however, for numerous reasons they have not produced the intended results. The only acceptable and safe alternative is using professional transportation services.

Outlined below is one of many examples of how a good intention can turn into a tragedy:

A local chapter of a national fraternity in Oregon held an off-premise social event. To provide a safe and fun environment, the chapter rented a 15-passenger van to transport members and guests to and from the location of the event. During one of the return trips, the sober member who was driving the van lost control and struck a telephone pole. The result was one passenger fatally injured and one seriously injured. Litigation soon followed and, ultimately, a substantial settlement was paid out on the claim.

From the description of the measures taken everything was done correctly. What went wrong?

The driver of the vehicle was unfamiliar with the van. Think about the times you jumped into a friend or family member's vehicle and searched for the lights switch, the air conditioning controls or how to dim the lights

The driver was not a professional driver; while he might have been sober, his passengers were not. Dealing with the distraction of passengers can be difficult, even for professional drivers.

The General Liability Hired and Non-Owned Auto Coverage afforded under the national fraternity's liability policy was immediately put into play due to the rental company and driver's insurance having insufficient limits to pay the entire amount of damages.



Because of situations such as this, we are requesting only professional drivers and transportation be utilized. This is just one example. Unfortunately, we could fill page after page with similar tragedies. We recommend the following requirements for any selected vendor employed to provide transportation to members and guest:

- Commercial Auto Insurance that provides coverage for transporting people and property for a fee.
- Commercial Auto Insurance that provides, at a minimum, primary coverage of \$1,000,000.00 combined single limit for bodily injury and property damage.
- A professional driver who has a valid commercial vehicle operator's license in the state in which the driver is located.

The standards set forth should be addressed in a formal undergraduate chapter business meeting. By working together to consistently meet these standards, we will be providing safe transportation that all previous measures had failed to accomplish and, together, we will be reducing the exposure to our brothers, chapters and the National Fraternity. This is an ultimate win-win situation we all want to achieve.



GENERAL LIABILITY CLAIMS

General Liability claims can be numerous and usually arise out of activities of a chapter which cause bodily injury, property damage or personal injury to an individual. They will more than likely involve damage or injury to someone other than an employee or an officer of the Fraternity.

While on the scene, if possible, get names, addresses and phone numbers of all parties involved, as well as any witnesses to the accident. Immediately complete the attached incident reporting form and submit.

What should be reported?

Report bodily injury of anyone other than an employee and any property damage for which there is the possibility a claim may be made against Sigma Tau Gamma Fraternity. Complete the incident reporting form in the Appendix which will provide the needed information regarding the claim. If you question whether to report a potential claim, ***report it!***

It is imperative all losses or incidents be reported immediately to Sigma Tau Gamma Fraternity (see phone numbers and address below). The Executive Director of Sigma Tau Gamma Fraternity is responsible for providing the initial report of the claim to Creative Risk Solutions (CRS). (See phone numbers and address below). Once the claim report is sent to CRS you will likely be contacted directly by them or an insurance company representative to discuss the incident. If you are unable to obtain all necessary details when first notified of any incident, still report any known facts.

Success or failure of Sigma Tau Gamma Fraternity, insurance program and our ability to obtain reasonably priced insurance is contingent upon accurate and timely reporting. It is incumbent upon you as a member of Sigma Tau Gamma Fraternity to report all known facts regarding bodily injury, property damage, or personal injury arising out of Sigma Tau Gamma Fraternity activities in a timely manner.

SIGMA TAU GAMMA *INCIDENT/CLAIM REPORTING*

Sigma Tau Gamma Fraternity
Vanessa Ryan, Interim CEO & COO
8741 Founders Road
Indianapolis, IN 46268-1338
Phone: 660.747.2222
E-mail: vryan@sigtau.org

Creative Risk Solutions
PO Box 9207
Des Moines, Iowa 50306

Linda Wright, Liability Manager
Phone: 877.544.7843 Ext. 5977
Email: LWright@creativerisksolutions.com

Jody Wender, Liability Claims Specialist III
Phone: 877.544.7843 Ext. 5938
Email: JWender@creativerisksolutions.com



OTHER INSURANCE COVERAGE

Member Accident Protection Program

The Fraternity's insurance program includes member accident protection as a benefit of membership. This covers *all undergraduate members and associates* of Sigma Tau Gamma that meet the following criteria:

- In good standing with the Fraternity
- Membership has been reported to Sigma Tau Gamma Administrative Office
- All associate, initiation, undergraduate and risk management/insurance dues have been paid
- Currently enrolled at the college or university where your chapter is located.

If the accident occurs during summer or holiday break, you must have been enrolled during the prior school term and be enrolled for the next term.

This coverage is intended to complement health insurance you should already have through your parents or other arrangements and is not a substitute for primary health insurance. This is a supplemental ACCIDENT ONLY protection and does not provide any protection for medical costs arising out of a SICKNESS. The policy pays eligible medical expense that is not recoverable from any other insurance policy, service contract, or workers' compensation policy. This policy will reimburse deductibles and co-pays of health insurance programs.

An overview of the coverage is as follows:

Insurance Carrier: Markel Insurance Company.
Policy Term: November 1, 2018 to November 1, 2019
Limits of Coverage: \$100,000 Accidental Medical Expense and/or Dental Injury-
 Accident Maximum
 \$5,000 Accidental Dismemberment and/or Accidental Death Benefit
 52 Week Benefit Period

The Policy does not cover Loss nor provide benefits for:

- Expenses for treatment on or to the teeth, except for treatment resulting from Injury to natural teeth
- Eyeglasses, hearing aids, and examination for the prescription or fitting there of
- Suicide, attempted suicide or intentionally self-inflicted Injury
- Injury due to participation in a riot
- Cosmetic surgery
- Loss resulting from air travel, except as a fare-paying passenger on a commercial airline
- Injury or Sickness resulting from any declared or undeclared war
- Injury or Sickness while in the armed forces of any country
- Injury or Sickness covered by any worker's comp or occupational disease law
- Treatment provided in a government Hospital unless the Insured is legally obligated to pay such charges
- Infections except pyogenic or bacterial infections caused wholly by a covered Injury or Sickness; unless it results from a covered injury
- Claims occurring while parachuting or hang-gliding
- Expenses covered by any other policy
- Hernia in any form
- Sickness or disease, in any form
- Fighting, unless an innocent victim
- Injuries due to intramural tackle football, hockey or rugby. All other intramural activities are covered
- All intercollegiate sport participation including off season conditioning
- The insureds being under the influence of any narcotic unless administered on the advice of a physician



OPTIONAL INSURANCE COVERAGE

Chapter Property Insurance Program

If a chapter of Sigma Tau Gamma Fraternity owns a physical plant or building, there is no coverage for damage to the building under the general liability policy for Sigma Tau Gamma Fraternity. The Fraternal Property Management Association Insurance Program is voluntary and open for participation of any chapter of Sigma Tau Gamma Fraternity. If your chapter wishes to be provided a coverage and premium proposal for the property program, please see the end of this section for details.

The property program provides all risk coverage insuring the building, contents, business income (loss of rents), extra expense, and boiler and machinery of property owned or leased by the local chapter or housing corporation. It must be understood, however, that this coverage does not insure the belongings of the individual members of the chapter. Each chapter member must ensure that their personal property is covered by other coverage, such as a renter insurance policy or his parents' homeowner policy.

How does a chapter participate in the property program?

If your chapter is interested in receiving a coverage and premium proposal, please have an officer request a coverage and premium proposal from Holmes Murphy, 13810 FNB Parkway, Suite 300, Omaha, NE 68154, Attn: Cynde Glantz. She can also be reached via e-mail or phone at cglantz@holmesmurphy.com or 402.898.4191.

A copy of the application is included in the Appendix of this manual can be faxed to: 800-328-0522 or you can visit the website www.holmesmurphyfraternal.com and go to "FPMA Property Program" and fill out the FPMA application.

Workers' Compensation Coverage

The Insurance Program of Sigma Tau Gamma does not provide Workers' Compensation Coverage for chapter employees. It is the duty of each house corporation to make certain they are familiar with their State laws and requirements to carry Workers' Compensation Coverage for employees of the Chapter.

Each State provides a State Assigned Risk Pool that can insure the Workers' Compensation exposures of the Chapter. The State Assigned Risk Pool can be accessed by contacting a local insurance agent or Holmes Murphy, your insurance broker, to obtain coverage. It is important to note that in addition to payrolls paid to a chapter cook and housemother, subsidized housing provided to chapter members in exchange for service in a position (i.e. house manager, kitchen steward, chapter officer) is also considered payroll and if injured, the individual likely has the right to recover damages under the Workers' Compensation laws of your State. We will work with you to help you place this coverage only if we also place the property coverage for your location.

All questions can be directed to:

Holmes Murphy
Jeannie Gilmore, Client Service Consultant
E-mail: JGilmore@holmesmurphy.com
Phone: 800.736.4327 Ext. 4198
Fax: 800.328.0522



APPENDIX



PROPERTY INSURANCE APPLICATION

PROPERTY INSURANCE INFORMATION

Property Owner: _____ Phone: _____

Owner Mailing Address: _____

Fraternity/Chapter Name: _____ University Affiliation: _____

Chapter Address: _____

Billing Contact: _____ Phone: _____

Billing Contact Address: _____

Billing Contact Title: _____ Email: _____

Mortgage/Loss Payee: _____ Loan: _____ Phone: _____

Address: _____

Inspection Contact: _____ Phone: _____

Inspection Contact Address: _____

Inspection Contact Email: _____

Year Property Built: _____ Number of Stories: _____

Number of Buildings at Location: _____

*****Separate information for each building required**

Is property currently occupied? Yes No

If no, how long has it been vacant? _____

Property Condition: Excellent Above Average Average Below Average

Is this classified as a historic building? Yes No

BUILDING CONSTRUCTION

Check the appropriate answer:

Walls: Brick Stone Wood Frame Other:

Floors: Wood Concrete

Roof Structure: Wood Concrete

Roof Covering: Asphalt Shingles Wood Shingles Tile Shingles

 Tar and Gravel (Flat Roof) Other Please List:

Basement Walls: Brick Concrete

If built prior to 1970, please provide when each of the following was updated (mm/yy):

Electrical Wiring: Heating: Cooling:
Plumbing: Roof:

** If unable to provide updates and the physical plant was built prior to 1970, please answer the questions in **Section 1** (If updates are provided, or if the physical plant was built after 1970, please skip to **Section 2**) **

Section 1

ELECTRICAL WIRING

Does the system use a fuse box with removable fuses or a circuit breaker box?

Removable Fuses Circuit Breaker Box

Is there an annual inspection of the system by an outside contractor? Yes No

HEATING, VENTILATION, AIR CONDITIONING

Does the heating system appear to be original or an updated system?

Original Updated

Is there an annual inspection of the system by an outside contractor? Yes No

PLUMBING

Are there any known leaks or problems with the plumbing system? Yes No

Please check the box that best describes the plumbing system:

Plastic Copper Galvanized Steel

ROOF

Are there any known leaks? Yes No

Section 2

SMOKE ALARMS

Battery Wired

Number of Smoke Alarms: Number of Fire Extinguishers:

SQUARE FOOTAGE

What is the square footage including the basement?

KITCHEN

Is there a kitchen on the premise? Yes No

 If yes, is there a metal Hood with an Ansul System? Yes No

BOILER

Is there a boiler on the premise? Yes No

SPRINKLER SYSTEM

Is the building sprinkled? Yes No

If the building is sprinkled please answer the following questions:

What percent of the total area is covered?

Is the sprinkler system serviced ANNUALLY by an outside contractor?

Yes No

If yes, please provide:

Contractor Name: Contractor Phone:

Contractor Address:

Last date of inspection:

Coverage Information

Expiration date of current policy: Current Carrier:

Current Property Premium:

Current Limits:

Building Limit: Replacement Cost

Contents Limit: Replacement Cost

Loss of Rents Limit: Annual Value

Other:

*****Please Note: You are responsible to insure to value**

Any losses in the last five years? Yes No

If yes, provide details on separate page

APPLICATION WARRANTY AND INSTRUCTIONS

I hereby warrant and confirm that the above information, to the best of my knowledge, is true and correct, and further certify that I have read all of the questions and answers of this application. I understand this application is a requirement for coverage and evidence of my acceptance of this insurance, and any falsification or misrepresentation will be deemed a breach of contract, voiding all insurance coverage. It is understood and agreed that the completion of this application shall not be binding either to the proposed insured or the company until accepted by the company or companies in writing from Holmes Murphy

Completed by: Signature:

Title: Date:

Address:

Email Address: Phone:

INCIDENT/CLAIM REPORTING FORM

When an incident arises at the chapter causing bodily injury or property damage to any person, the following information must be obtained immediately. This report is being prepared for submission to the Fraternity's General Counsel, so please be thorough. Do not withhold reporting an incident to obtain all required information. Because timeliness is of the essence, report it immediately and send a copy within **24 hours** to the National Headquarters. If the bodily injury is of a serious nature, **a telephone call** should also be made.

Chapter Name: _____ Phone: _____
Address: _____
Chapter President: _____
Chapter Advisor (CA): _____ CA Phone: _____
CA Address: _____
House Corp President (HC): _____ HC President Phone: _____
HC President Address: _____
Date of Incident: _____ Injured Party (IP): _____
IP Address: _____ IP Phone: _____
Witnesses & Phone numbers: _____

Did incident happen off premises? (Leased or Rented) Yes No

If yes, Owner's Name _____ Owner's Phone: _____

Owner's Address: _____

Police Investigation? Yes No

Name of Agency & Case: _____

Description of injury & where was injured party taken: _____

Description of what happened (What, when, where, how): _____

Form completed by: _____ Title: _____

Phone: _____ Email: _____

***Please utilize the back side of this form if you should run short of room.

1. Who is planning the event?

Organization:

Name:

Title:

Email:

Phone:

2. Name of event:

3. Location of event:

- Chapter Property
- Rented Facility
- Other:

4. Beginning time of event: AM PM

5. Ending time of event: AM PM

6. Purpose of event:

- Recruitment
- Socialize
- Philanthropy
- Other:

7. Which best describes the event below? Check all that apply.

- | | |
|---|--|
| Dry event (no alcohol) | Third Party Vendor at a location |
| Member Event Only | Guest list event |
| Event with one fraternal organization | New member event |
| Fundraiser | Sport |
| BYOB | Third Party Vendor at chapter facility |
| Member and Date Event | Parent Event |
| Event with more than one fraternal organization | Event with non-fraternal organization |
| Philanthropy | Recruitment |

8. The activities below could be considered high risk events. Does the planned event contain any of the following?

- | | |
|---|--|
| <input type="checkbox"/> Bring your own gun (trap/skeet shooting) | <input type="checkbox"/> Slip & Slides/Any other water feature |
| <input type="checkbox"/> Sky diving/ parasailing/bungee jumping | <input type="checkbox"/> "Warrior Dash" (creation of an obstacle course)/
"Color Run"/ "Zombie Run" |
| <input type="checkbox"/> Boxing tournament | <input type="checkbox"/> Contact sports |
| <input type="checkbox"/> Building of temporary structures | <input type="checkbox"/> Bonfires |
| <input type="checkbox"/> Pools | <input type="checkbox"/> Tug-o-war |
| <input type="checkbox"/> Mechanical Bulls | <input type="checkbox"/> Rock Climbing |
| <input type="checkbox"/> Bounce Houses/Inflatables | |
| <input type="checkbox"/> Other: | |

9. Has any written contract or agreement been signed for any part of this event? **Y** **N**

If yes, please provide copy of contract/agreement.

10. Have contracts been signed with all Third Party Vendors? Provide Company and Contact Person(s)

- Food caterer:
- Security guards:
- Bus/transportation company:
- Third party vendor:
- University facility:
- Hotel venue:
- Sports field:
- DJ:
- Band:
- Artist:
- Restroom and Waste Management:
- Other:

HOW WILL ALCOHOL GET TO THE EVENT?

FIPG Guidelines allow chapters to host events with alcohol in one of two ways:

BYOB [Bring Your Own Beverage]

Everyone brings their own alcohol, including members, associate/new members, guests, and alumni. Use the BYOB worksheet to help plan your BYOB event.
[Event Planning Guide; pg. 6-7]

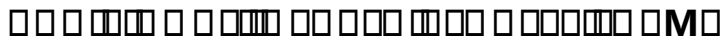
Third-Party Vendor

Contract with a licensed establishment or caterer to provide a cash bar and/or a licensed location to host your event. Use the Third-Party Vendor worksheet to help plan your Third-Party Vendor event.
[Event Planning Guide; pg. 8-9]

Dry Event

*****See Event Planning Guide Link on Page 21*****

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If you are part of an inter/national fraternity insurance program, review of event procedures and approval of your headquarters office is required. Holmes Murphy Fraternal Practice will provide information and request approval on your behalf. In all cases, issuance of additional insured protection is at the full discretion of the underwriter. Submission of a request does not automatically grant the requested additional insured protection.

Please note that if this request is in regard to an event, we ask you complete the Event Details Checklist found on our website and return it with this form.

<http://www.holmesmurphy.com/fraternal/wp-content/uploads/sites/2/2016/11/Event-Planning-Guide-2017-Final-MCC.pdf>

Your Information

Fraternity Name*

Chapter Name*

Your Name

Your Title*

Your Email*

Is this for:

Special Event

Term Policy

If for a special event, what is the event?*

Date of the Event (If full policy term, use today's date)*

Venue of the Event

Number of Participants

Additional Insured Information

Name of Additional Insured*

Address*

Street Address

City

State/Province/Region

ZIP

Phone*

Email*

If required wording is needed, please state:

*REQUIRED FIELDS

Please remember to attach all contracts/agreements for the event

ATHLETIC EVENT PARTICIPATION WAIVER

I, _____, a registered participant in an activity sponsored by _____ Chapter of _____ Fraternity to be held on _____, understand and agree that I am participating in this event on my own free will and accord and that neither _____ Chapter, nor _____ Fraternity, nor its insurer(s) will share in or accept responsibility for any liability for bodily injury, property damage, medical expense or other loss that may arise from my participation in this event.

I further understand and agree, and have no expectation that _____ Chapter, or _____ Fraternity will provide any form of security or other measure of safeguarding for this event, as there is no reasonable expectation that such will be necessary.

I further understand and agree that this event is considered a "no-fault" event by me, as well as _____ Chapter, and _____ Fraternity and in the event of bodily injury, property damage, necessity of medical expenses or other loss, I agree to incur my own expenses without input or participation from _____ Chapter, or _____ Fraternity, or its insurer(s).

Guest/Participant:

Chapter Representative:

Witness:

Witness:

Date:

Date:

This form should be only used for athletic events and completed for all participants. Chapters should keep the waiver forms for possible liability issues and record keeping purposes.

DEFINITIONS

Certificate of Liability Insurance: This is a certificate issued by the insurance company detailing the particulars of the insurance coverage in place for all chapters and regions under the general liability policy. This certificate may be used to document the existence of coverages for chapters and regions. This document is not sufficient when a third party requests a certificate where they are named as an additional insured.

Certificate of Liability Insurance for an Additional Insured: This is a certificate issued by the insurance company detailing the particulars of the insurance coverage in place for all chapters and regions under the general liability policy. This document specifically identifies a third party as being expressly covered under the general liability policy for a specified period of time (i.e. an additional insured). This form of insurance certificate is often requested by facilities where chapters or regions are planning to hold events.

Special Event: Events other than those where Fraternity business is the primary purpose of the meeting are considered Special Events. In general, all special events are covered under the general liability policy. However, there are specific events that have been deemed to be high risk. When these sorts of events are planned by chapters, approval from the National Headquarters must be sought 30 days prior to the event date (See special events section in the manual).

General Liability Insurance: Coverage that pertains, for the most part, to claims arising out of the insured's liability for injuries or damage caused by ownership of property, manufacturing operations, contracting operations, sale or distribution of products, and the operation of machinery, as well as professional services.

Directors' & Officers' Liability Insurance: Offers directors and officers protection from personal liability and financial loss arising out of wrongful acts committed or allegedly committed in their capacity as officers and/or directors.

Aggregate Limit: A limit in an insurance policy stipulating the most it will pay for all covered losses sustained during a specified period of time, usually one year. Aggregate limits are commonly included in liability policies and apply per chapter location.

Occurrence: An accident, including continuous or repeated exposure to substantially the same general, harmful conditions.

Claim: An incident where the injured party is making a demand for compensation under the terms of an insurance contract.

Incident: An occurrence involving bodily injury to a member or guest that does not result in a formal claim. All incidents must be reported when discovered due to possibility of them becoming a claim.

Bodily Injury: Injury to the body, sickness or disease sustained by a person, including death resulting from any of these at any time.

Property Damage: Physical injury to tangible property, including all resulting loss of use of that property. All such loss of use shall be deemed to occur at the time of the physical injury that caused it; or Loss of use of tangible property that is not physically injured. All such loss of use shall be deemed to occur, at the time of the "occurrence" that caused it.

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