

SHOOT CANCELLATION PROPOSAL FORM

IMPORTANT NOTE: Take care to complete this form fully and correctly. If you withhold or misrepresent any information requested (which is likely to influence the company's acceptance and assessment of this proposal) the insurance may be voidable. If you are in any doubt about any information which might be considered relevant you should disclose it. You are advised to keep a record (including copies of letters) of all information supplied for the purpose of entering into the contract. The liability of the company does not commence until this proposal has been accepted by the company. A copy of this proposal will be supplied to you on request.

Name			
Address			
		Postcode	
Telephone No			

Amount of indemnity required expenses	£

In respect of any risk proposed, has any insurer:	Yes	No
Ever cancelled or declined to renew a policy?		
Imposed special terms, or		
Declined to provide a quotation?		
If YES please provide details		

Period of Insurance	From	To

The Event	
Type of Event	
Venue of the Event	
Dates of the Event	

Who is in charge and/or organising the event	
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Has this Event been held before	Yes	No
If YES, how many times		

Underwritten by Geo Agriculture and AXA Insurance PLC.

Geo Agriculture is a trading name of Geo Underwriting Services Limited. Registered in England No. 4070987. Registered Address: 2 Minster Court, Mincing Lane, London EC3R 7PD. Authorised and regulated by the Financial Conduct Authority. FCA Register Number 308400

Has this Event been cancelled before	Yes	No
If YES, please provide details		

Have all arrangements including the signing of all necessary contracts been made for the staging of the event	Yes	No
If NO, please provide details		

What are the critical factors upon which the staging of your event depends

Are there any contingency plans to counteract problems such as bad weather or to re-schedule the event if it is cancelled	Yes	No
NOTE: The policy provides an indemnity in respect of additional costs and expenses reasonably incurred in mitigating/avoiding a loss providing they are included within the sum insured.		

If the event is to take place over more than one day please provide a breakdown of the sum insured for each day (please ensure to include any amount for additional expenses incurred if cover is required)

DECLARATION	
I/we agree that all statements and particulars in this proposal are to the best of my knowledge and belief true and I have withheld or misrepresented any information.	
Signature	
Date	

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