

**LIABILITY INSURANCE FOR THE EVENTS OF OUTSIDE USERS AT
ARCHDIOCESE OF SAN FRANCISCO FACILITIES**

INSTRUCTIONS: 1) Complete this form providing all requested information. 2) Make 4 copies – one copy for the Outside User, one copy for your file, two copies for the Chancery. 3) Immediately mail the two Chancery copies of application with the Tenant Users check. 4) Checks must be payable to “The Archdiocese of San Francisco.

Note: This form can be found on-line at sfarchdiocese.org/about-us/policies/insurance

Parish or Agency (Additional Insured - Lessor) _____ Street Address _____ City _____ Zip _____

Facility/Building (i.e. Hall, School Gym, ...) To be used and address if different from above. _____

Sponsoring Organization or Individual Lessee (Named Insured) _____ Type of Event (reception, meeting... Please specify.) _____

Contact Person(s) _____ Date of Event _____

Address City _____ Telephone _____ Time of Event _____

Liquor being served? Yes No If Yes, Liquor liability must be purchased – see below

Food being served? Yes No

Number of Participants: _____

*Coverage is provided only for the event and dates specified above.
Prompt notification to the program administrator of any loss or incident is required.*

_____ Date of Request

Signature of Outside User/Named Insured _____

Signature of Pastor, Parish Administrator or Diocesan Representative
acknowledging receipt of completed request, payment & Short Term Use Agreement.

Liability Insurance Coverage provided by:
Limit of General Liability coverage:

Employers Fire Insurance Company
\$1,000,000 Occurrence
Aggregate – None

Cost of coverage premium: (Check One)

1-100 Attendees: \$125 per event

101-500 Attendees: \$155 per event

501-1,500 Attendees: \$210 per event

\$200 per event WITH Liquor Liability

\$340 per event WITH Liquor Liability

\$470 per event WITH Liquor Liability

THIS NOTIFICATION OF AN EVENT *MUST* REACH THE
CHANCERY AT LEAST SEVEN (7) DAYS PRIOR TO THE EVENT

REMIT COMPLETED FORM AND PAYMENT TO:

Archdiocese of San Francisco
One Peter Yorke Way
San Francisco, CA 94109-6602
Attn: Lourdes Molina
Phone: (415) 614-5519

PROGRAM ADMINISTRATOR:

Arthur J. Gallagher Risk Management Services
Arthur J. Gallagher & Co. Insurance Brokers of California, Inc.
P. O. Box 7443
San Francisco, CA 94120-7443
Phone: (415) 546-9300