



I - Exhibitor Company Name:				Tel:			
Type of Business:				Fax:			
Mailing address:		Unit/Ste	City	Province		Postal Code	
(*) Email address (PLEASE INCLUDE YOUR EMAIL ADDRESS – REQUIRED TO RECEIVE YOUR INVOICE AND CERTIFICATE OF INSURANCE):							

II - Show Organizer (Complete legal Name(s) to be added on certificate as additional insured):  
**METROLAND MEDIA GROUP INC.**

Address: 160 King St E.		Unit/Ste	City Kitchener	Province ON	Postal Code N 2 G - 4 E 5				
Event Name: NATIONAL BRIDAL SHOW		Unit/Ste	City MISSISSAUGA	Province ON	Booth#:				
Address: INTERNATIONAL CENTRE, HALL 5									
Event Date ( Includes Move In and Move Out):		FROM	dd 9	mm Sep	yyyy 2010	TO	dd 12	mm Sep	yyyy 2010

**SCHEDULE OF COVERAGES**

**\$25,000** Property of Every Description (At the designated booth space) – Broad Form. **\$25,000 In Transit Coverage** (3 days before and after the show) Subject to \$1,000 Deductible and a 90% Co-Insurance. Higher limits available for an additional premium.

**Vendor/Exhibitor Extra Expenses - \$5,000 limit** Coverage up to purchase replacement items, and/or last-minute printing, due to event giveaways, brochures, audio visual equipment, or display structure(s) having been lost in transit, or damaged and therefore unusable, through no fault of the insured and reasons beyond their control, for any duration of the event. See wording for full coverage details.

**\$2,000,000** Comprehensive General Liability – Bodily injury and Property Damage Liability, Subject to \$1,000 BI, PD and Expenses Deductible. Products and Completed Operations Liability (\$2,000,000 aggregate limit), Personal & Advertising Injury (\$2,000,000 aggregate limit), Employees as additional insureds, Volunteers as additional insureds, Owners, Managers or Lessors of Premises as additional Insured. **\$250,000** Tenants Legal Liability – Broad Form

**- Coverage is subject to underwriting review.** Limited coverages available for non qualifying risks. Asbestos Exclusion, Mold Fungi Exclusion, Data, War, Nuclear, Property flood and earthquake exclusion. Coverage limited to Event Premises. Territory Restriction – Canada Only. Suits brought in Canada Only.

**Ineligible Risks:** Children’s Toys, Chemicals, Fertilizers, Pharmaceuticals, Nutraceuticals, Vitamins, Health or Dietary Supplements, Firearms, Pesticides, Fireworks, Computers, Alcoholic beverages, Games, Licensed or Unlicensed Motorized Vehicles- including but not limited to: Motorcycles, Watercrafts, All terrain Vehicles, and Tractors. Note: **There is no Liability coverage for Vehicles in Motion.**

**Property excluded:** EDP (Electronic Data Processing), audio & video equipment, watches, jewellery made of precious or semi precious stones and/or precious metals, money, bullion, securities, stamps, antiques, furs, and fine arts valued at \$5,000 per item or greater. **Insurer: Various Insurers through Canfinse Group Inc.**

**Note:** I hereby appoint Canfinse Group Inc. as my authorized representative for this program. I am applying for insurance based on the information provided above. With respect to this application or any change in coverages, I authorize you to collect, use and disclose information as permitted by law for the purposes necessary to assess the risk, investigate and settle claims, and detect and prevent fraud, and analyzing business results.

Please Print Owner’s Name (if Sole Proprietorship):	Signature:	dd	mm	yy

**Note:** The above insurance program will only be offered if the application form is signed and completed in full, and the payment and the application form are received in our offices prior to the opening show date. Note: Completion of this application does not automatically bind coverage. We reserve the right to review all risks following online binding for underwriting compliance. Premium and fee are minimum, retained and fully earned. Coverage is void if payment is returned N.S.F.  
**NSF fee of \$50 will apply.** A full copy of this policy is available upon request or online at [www.exhibitorinsurance.com](http://www.exhibitorinsurance.com).  
**A copy of the certificate is available to your Show Organizer upon their request.**

III - PAYMENT TERMS AND CONDITIONS - \* higher property limits available upon request

▼ Please Select ►	Liability Only - *** NEW ***	Liability + Property <b>\$25,000*</b>
<b>Preferred Rate</b> Payment received <i>at least 14 days before the opening day of show</i>	Premium \$50 + Fee \$100 + PST = <b>\$162</b>	Premium \$75 + Fee\$109.26 + PST = <b>\$199</b>
<b>Regular Rate</b> Payment received <i>13 days or less before the opening day of show</i>	Premium \$50 + Fee \$112.04 + PST = <b>\$175</b>	Premium \$75 + Fee\$124.08 + PST = <b>\$215</b>
<b>TOTAL ►</b>	<b>\$</b>	<b>\$</b>

Payment type:

If mailing a cheque, please remit payment to:

Card# \_\_\_\_\_ Expiry Date

(The payment due on the Credit Card statement will be in the name of [www.ExhibitorInsurance.com](http://www.ExhibitorInsurance.com))

**Name of the Credit Card Holder:** \_\_\_\_\_

**Important:** \*Fill in your credit card billing address if it is different from mailing address above, to process your payment:

\_\_\_\_\_

Cheque  Money Order (Please make **Cheque** or **Money Order** payable to **Canfinse Group Inc.**)

Tel: 416-667-9177, Fax: 1-866-591-5613

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Cardholder Signature \_\_\_\_\_

*I agree to pay above total according to my card issuer agreement.*