



SPECIALTY

INSURANCE AGENCY

Performers of the U.S. Entertainer Insurance Application

Mailing address: 3432 Denmark Avenue #231, Eagan, MN 55123

Phone: 715-246-8908 **Fax:** 715-246-8908 **Email:** info@specialtyinsuranceagency.com

General information:

☐ I am a new account ☐ I am renewing my coverage

First name:

M.I.

Last name:

Performer name/business name:

Policy change for those with Inc or LLC in their dba as of 4/1/2025: Our carrier has informed us they will no longer accept dba's with LLC or Inc at the end, even if it's for a sole proprietor. This is because including Inc or LLC could elude coverage being extended to employees, board members, or others involved with the business, which this policy does not. Nothing in the policy has changed (it's always been an individual policy that insures one person), but they would like to prevent increased legal fees should someone argue there's additional coverage because of the addition of Inc or LLC.

Birth date:

U.S. mailing address:

City:

State:

Zip code:

Home phone:

Cell phone:

Email address:

Website:

Requested start date:

We cannot backdate insurance. Select a date in the future (tomorrow or further out). If you're mailing in your application, please allow 1.5 – 2 weeks for it to arrive. You may also submit this application via email to info@specialtyinsuranceagency.com. Rush, same-day service available upon request.

Check the boxes below that best describe your performance:

Group 1:

- ☐ Balloon Twister ☐ Bubble Artist ☐ Circus Side Show Performer ☐ Clown ☐ Comedian
- ☐ Costumed Character ☐ Cyclist/Tricyclist ☐ Globe Walker ☐ Hula Hooper ☐ Human Statue ☐ Juggler
- ☐ Mermaid/Merman ☐ Mime ☐ Pirate ☐ Santa/Mrs. Claus ☐ Stilt Walker ☐ Unicyclist
- ☐ Caricature Artist ☐ Face and Body Painter ☐ Glitter/Airbrush Tattoo Artist ☐ Henna/Jagua Design Artist

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| Group 1 (continued): |
| <input type="checkbox"/> Acrobat <input type="checkbox"/> Contortionist <input type="checkbox"/> Cyr Wheel Performer <input type="checkbox"/> German Wheel Performer <input type="checkbox"/> Gymnast <input type="checkbox"/> Hand Balance Performer <input type="checkbox"/> Rola-Bola Performer <input type="checkbox"/> Roller Skater |
| <input type="checkbox"/> Children's Entertainer <input type="checkbox"/> Puppeteer <input type="checkbox"/> Ventriloquist |
| <input type="checkbox"/> Palm Reader <input type="checkbox"/> Tarot Reader |
| <input type="checkbox"/> Escape Artist <input type="checkbox"/> Illusionist <input type="checkbox"/> Magician <input type="checkbox"/> Mentalist |
| <input type="checkbox"/> Author <input type="checkbox"/> Emcee <input type="checkbox"/> Photographer/Photobooth <input type="checkbox"/> Public Speaker <input type="checkbox"/> Storyteller <input type="checkbox"/> Videographer |
| <input type="checkbox"/> 1 Man Band <input type="checkbox"/> Band Leader <input type="checkbox"/> Belly Dancer <input type="checkbox"/> Dancer <input type="checkbox"/> DJ <input type="checkbox"/> Musician <input type="checkbox"/> Singer |
| <input type="checkbox"/> Chainsaw Demonstrator/Artist <input type="checkbox"/> Lumberjack/jill <input type="checkbox"/> Rope Tricks Performer <input type="checkbox"/> Western Performer <input type="checkbox"/> Whip Cracker |
| Group 2: |
| <input type="checkbox"/> Aerialist <input type="checkbox"/> Angle Grinder <input type="checkbox"/> Fire Breather <input type="checkbox"/> Fire Dancer <input type="checkbox"/> Fire Performer <input type="checkbox"/> Knife Thrower <input type="checkbox"/> Live Painter <input type="checkbox"/> Other: _____ <input type="checkbox"/> Pole Artist (Aerial, Chinese, Dance) <input type="checkbox"/> Tightrope/Tightwire Performer (under 30 feet high) |
| Group 3: |
| <input type="checkbox"/> Foam Artist |
| Operations not eligible: Group 1: Trackless trains, moonwalks, jump houses or other amusement rides and attractions, black henna, grandstand bleachers, hypnotists, performing with animals (note: magicians are allowed to perform with rabbits and doves), or high-risk motorized activities. Audience member participation is not allowed with whip cracking. Use of gun powder is not allowed. Group 2: Aerial or fire performing instruction to others, rigging for other performers, zip line performances, sky walking (tight wire), fireworks, pyrotechnic devices, and all of the above listed in Group 1. Group 3: Snow machines, individuals operating a foam cannon other than the named insured, and all of the above listed in Group 1 and Group 2. |
| Performance description (attach additional pages if needed): |
| <div style="border: 1px solid black; height: 150px; width: 100%;"></div> |

| Annual gross revenue from previous year (performing revenue ONLY): | | | | |
|---|--|--|--|--|
| <input type="checkbox"/> Up to \$35,000 | <input type="checkbox"/> Up to \$100,000 | <input type="checkbox"/> Up to \$200,000 | <input type="checkbox"/> Up to \$300,000 | <input type="checkbox"/> Up to \$400,000 |
| Note: If you make over \$400,000 you are not eligible for this insurance program. Please contact our office for other options. | | | | |

| Select your general liability limits of coverage: |
|---|
| <p>You checked the boxes above to best describe what you do. These boxes are in three groups.</p> <ol style="list-style-type: none"> 1. Put a check in the premium cost box for the last group you selected above. 2. Check the box for Option 1 or Option 2 limits of coverage you need based on the number of events you do per year. Events per year are from the previous year. |

| Commercial General Liability Coverage | Option 1 limits | Option 2 limits |
|--|---|---|
| Each occurrence | \$1,000,000 | \$3,000,000 |
| General aggregate | \$2,000,000 | \$5,000,000 |
| Products-completed operations aggregate | \$2,000,000 | \$5,000,000 |
| Personal and advertising injury | \$1,000,000 | \$3,000,000 |
| Damage to rental property (fire legal liability) | \$300,000 | \$300,000 |
| Medial expense | \$5,000 | \$5,000 |
| Deductible | Zero | Zero |
| Premium cost – annual coverage | | |
| <input type="checkbox"/> Group 1 | <input type="checkbox"/> \$304 (1-19 events) <input type="checkbox"/> \$314 (20+ events) | <input type="checkbox"/> \$850 (1-19 events) <input type="checkbox"/> \$860 (20+ events) |
| <input type="checkbox"/> Group 2 | <input type="checkbox"/> \$326 (1-19 events) <input type="checkbox"/> \$336 (20+ events) | <input type="checkbox"/> \$900 (1-19 events) <input type="checkbox"/> \$910 (20+ events) |
| <input type="checkbox"/> Group 3 | <input type="checkbox"/> \$408 (1-19 events) <input type="checkbox"/> \$418 (20+ events) | <input type="checkbox"/> \$1,015 (1-19 events) <input type="checkbox"/> \$1,025 (20+ events) |
| Premium cost – single event (up to 10 days) | | |
| <input type="checkbox"/> Group 1 | <input type="checkbox"/> \$149 | <input type="checkbox"/> \$420 |
| <input type="checkbox"/> Group 2 | <input type="checkbox"/> \$171 | <input type="checkbox"/> \$470 |
| <input type="checkbox"/> Group 3 | <input type="checkbox"/> \$253 | <input type="checkbox"/> \$585 |
| Commercial General Liability premium total: | | \$ |

| Performer assistant(s) – optional coverage: |
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| <p>Please note, an assistant cannot be another performer. The duties of an assistant can be as follows: Works with the insured for set-up and tear down, helps with planning and organization of a show or booking, works with contracts, coordinates permits, requests additional insured certificates, handles prop changes during the show, assists with crowd control, staged spectator called upon to assist with an act, acts as a safety coordinator. Key to this coverage: An assistant is a low-risk personnel that would not stop the show from going on if they weren't there.</p> |
| Assistant description (attach additional pages if needed): |
| Number of assistants you need the policy to cover (\$100 per assistant): |
| Performer Assistant premium total: |

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| Inland Marine (business personal property) – optional coverage: | | |
| Inland Marine will cover your business personal property (equipment and costumes) and goods while stored, in transit to/from a show, or while at a show for damage or if stolen. | | |
| Inland Marine – business personal property | Option 1 limits | Option 2 limits |
| Coverage limits | \$10,000 | \$25,000 |
| Deductible for ALL losses | \$500 | \$500 |
| Premium cost | <input type="checkbox"/> \$242 | <input type="checkbox"/> \$455 |
| List your business personal property below (attach additional pages if needed): | | |
| | | |
| Inland Marine (business personal property) premium total: | | \$ |

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| Sexual Abuse and Molestation (SAM) – optional coverage: | | |
| Many schools in California and Illinois require that you carry Sexual Abuse and Molestation (SAM) coverage in addition to your general liability coverage before they permit you on the school grounds. We offer two different coverage limits. Please note, Option 2 is only available in California and Illinois. | | |
| Commercial General Liability Coverage | Option 1 limits | Option 2 limits (CA/IL only) |
| Each occurrence | \$100,000 | \$1,000,000 |
| General aggregate | \$300,000 | \$2,000,000 |
| Premium cost | <input type="checkbox"/> \$150 | <input type="checkbox"/> \$750 |
| Sexual Abuse and Molestation (SAM) premium total: | | \$ |

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|---|-----------|
| Final premium totals: | |
| Commercial General Liability | \$ |
| Performer Assistant - optional | \$ |
| Inland Marine (business personal property) – optional | \$ |
| Sexual Abuse and Molestation (SAM) - optional | \$ |
| Total cost due now: | \$ |
| Payment methods: | |
| <p>Check: Please make checks payable to Specialty Insurance Agency. Mailing address: 3432 Denmark Avenue #231, Eagan, MN 55123.</p> <p>Card: There is a 3.25% processing fee when paying by credit card. Once completed, email your application to info@specialtyinsuranceagency.com or fax it to 715-246-8908. Once you've sent your application over, give our office a call to pay with a card over the phone. Alternatively, you can complete the online application and pay by card that way.</p> | |

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| Fire performers ONLY: Please initial the following statement: | |
| <p>_____ I understand that the use of pyrotechnics or devices that propel flame or lit projectiles away from the control of the performer are excluded from coverage (e.g., steel wool or charcoal modified props).</p> | |

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| Read and sign: | | |
| <i>This is an application for membership. This application provides a brief outline of coverage. Coverage is subject to all terms, conditions, and exclusions stated in the insurance policy which can be viewed from your online client dashboard.</i> | | |
| Applicant signature: | Printed name: | Date: |
| | | |