

Your business is music to our ears.

You spend hours perfecting your talent and invest in equipment which allows you to express it. HUB International is in-tune with your needs and has you covered.

PROGRAM FEATURES

- · All-risks' coverage on your instruments and equipment
- Worldwide coverage
- Rental Reimbursement up to \$10,000 in coverage, if you need to rent instruments or equipment in the event of a loss
- \$100 deductible per occurrence on instruments and equipment
- Commercial General Liability including bodily injury, property damage, medical payments, tenants legal liability and non-owned automobile
- Up to \$2,500 coverage on promotion material, T-shirts, CD's, posters, etc.
- Loss of earnings up to \$5,000 due to loss or damage to venue
- Loss of earning up to \$5,000 due to loss or damage to equipment
- Rented, Leased or Borrowed Equipment, \$10,000 limit up to 14 consecutive days

RATES AND PREMIUMS

- \$2 rate per \$100 sum insured for Instruments and Equipment
- Liability rates (\$500 deductible):
 - \$1,000,000 limit \$60 per member
 - o \$2,000,000 \$115 per member
 - Higher limits available upon request

APPLY FOR COVERAGE

 $Cristina\ Omar|\ \underline{cristina.omar@hubinternational.com}\ |\ 519-325-1785\ |\ TF:800-463-4700$







Application for Musicians' Program

Instrument, Equipment & Liability Coverage

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Full Name of Insured:		Telephone Number:			CFM / AFM Local No:			
Mailing Address (including				MROC Number:				
Street	Town, Province Postal Code							
Member's E-mail Addres	s a/o Website Address:							
If you are a member of a	group, provide the name	f the group:			Number in Group:			
						1		
Insurance Cove	rage Requirem	ents List e	ach instrume	ent or piece se	parately. Attac	ched separate	sheet, if necessary	
Quantity Set	Make			Mode	el .	:	Serial Number	Total Stated Value
			Total Stated Va			alue of all Instruments & Equipment		
	(round 2% rep				2% of replacement cost placement cost to nearest dollar)			
		Liability Limit \$1,000,000 = \$60 multiplied by No				X \$60		
		Liability Limit \$2,000,000 = \$115 multiplied by No			. of members	X \$115		
		Total Policy Premium:						
	Applicable Taxes: (Saskatchewan 6% Ontario 8% Quebec 9% NFLD 15%)							
	(Please make cheque payable to HUB International Ontario Limited or pro				Total Policy Premium rovide credit card number & expiry date below)			
Visa or Mastercard Number		Expiry Date:			Three digit Security Code (on reverse):			
personal information may disclose any of this perso policies, renewals, chang	sonal information in this do y include, but is not limited onal information, subject to ges of coverage, evaluating ontained in this document	to, my credit the law and t g claims, dete	information a to my broker cting and pre	and claims hist 's or insurance eventing fraud	tory. I authorize company's po and analyzing	e my broker o blicy regarding business resu	or insurance compan personal informatio	y to collect, use and n and underwriting my
Signature:						Date:		

*By providing my signature, I certify that I am a member in good standing of the Canadian Federation of Musicians or the Musicians' Rights Organization of Canada (MROC).

Return this application with payment by email, mail or fax to:

 $\label{lem:cristina_omar@hubinternational.com} \ | \ 519-325-1785 \ | \ TF: \ 800-463-4700 \ | F: \ 519-326-0128 \\ HUB \ International, \ 24 \ Seacliff \ Drive \ East, \ Unit \ 100, \ Learnington, \ ON \ N8H \ OC2$

