

**BC ATHLETICS
ALTERNATIVE LIABILITY INSURANCE CHECKLIST
For**

BC ATHLETICS SANCTIONED EVENTS

Below please find a checklist outlining the insurance coverage required for a BC Athletics Sanctioned event. Those items that are essential to BC Athletics and to the sanction process are marked with an asterisk. Any event that does not have insurance to cover the items marked (with an asterisk) will not be sanctioned. You may obtain the insurance through any source of your choosing.

If you opt for Alternative Liability Insurance please have your insurance agent complete and return the checklist along with a Certificate of Insurance that includes the coverage as required, to BC Athletics.

Basic Liability Policy	Yes	No	Required
General Liability Insurance Coverage which names BC Athletics and its officers and directors, members, agents, employees and volunteers as additional insureds. Minimum coverage level required is \$5,000,000.			*
Legal Liability for bodily injury or death to spectators and other members of the public and accidental damage to their property arising from any sanctioned activity.			*
Participants and volunteers named in the policy (directors, athletes, coaches, trainers, employees, volunteers, and other members)			*
Participant to Participant coverage			*
Liability Protection (Canada and Continental USA)			*
Event Sponsors named as additional insureds			*
Facility Owners named as additional insureds. (Owners of the facilities, highways, streets, land, parks, buildings, stadiums, etc. where the event will take place.)			*
Cross Liability			*
Incidental Medical Malpractice			*
Non-owned Automobile			*
Voluntary Medical Payments			*
Products and Completed Operation			*
Liquor Licence Liability (required if liquor is being served)			
Employers Liability			*
Owners Protective Liability			*
Blanket Tenants Liability (all risks) – Minimum of \$250,000 in coverage			*
Advertising Injury Liability			*
Broad Form Property Damage			*

Event: _____ Date: _____

Above coverage's confirmed by: _____
INSURANCE AGENT NAME (please print)

Signature: _____

Name of Insurance Company: _____ Policy Number: _____

Note: The requirements for insurance for BC Athletics sanctioned events are subject to review and updating. Please reference the BC Athletics website: www.bcathletics.org for the most current insurance checklist. As of April 1/07

BC Athletics Office Use:	Date: _____
Insurance Checklist:	
Approved _____ Disapproved _____ Pending _____	
Signature of Authorized BC Athletics Management:	