

Radio Amateurs of Canada Insurance Application Form

Year: 2024



Club Information:

Call Sign: _____ Club Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Contact Information:

Call Sign: _____ Name: _____

Email: _____ Phone number: _____

Position in Club: _____

Membership and Insurance Information:

Total Number of Club Members (include all): _____

Total Number of Non-RAC Members: _____

Dues-Exempt Non-RAC Members: _____

Is Loss & Damage Insurance on Equipment Required? Yes No

If yes, Total Actual Cash Value to be Insured:

Are additional insured certificates required? Yes No

Certificate Holder Name and Address	Activity, Location and Date	Has certificate been requested before and is on file? Indicate "Yes" or "No"

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Insurance Information:

Does the club have full-time or part-time employees? Yes No If yes, how many? _____

Annual Revenue from all sources: _____

Club Meetings:

Number of Meetings per Year: _____

Location of Meetings: _____

Type of Facility: (please check) Rented Owned

List all other annual events and activities:

Activity name	Description	Is Alcohol involved? Indicate "Yes" or "No"

Any occurrences that may lead to a claim? Yes No

Any claims during the last five years? Yes No

Has any insurer cancelled, declined or refused any commercial insurance to the applicant in the last five years? Yes No

Submitted by: Name (print) _____

Name (signature) _____

Date _____