

Radio Amateurs of Canada Insurance Application Form

Year: 2027



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 _____