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
☐ Acrobat ☐ Contortionist ☐ Cyr Wheel Performer ☐ German Wheel Performer ☐ Gymnast ☐ Hand Balance Performer ☐ Rola-Bola Performer ☐ Roller Skater
☐ Children's Entertainer ☐ Puppeteer ☐ Ventriloquist

Group 1 (continued):
☐ Palm Reader ☐ Tarot Reader
☐ Escape Artist ☐ Illusionist ☐ Magician ☐ Mentalist
☐ Author ☐ Emcee ☐ Photographer/Photobooth ☐ Public Speaker ☐ Storyteller ☐ Videographer
☐ 1 Man Band ☐ Band Leader ☐ Belly Dancer ☐ Dancer ☐ DJ ☐ Musician ☐ Singer
☐ Chainsaw Demonstrator/Artist ☐ Lumberjack/jill ☐ Rope Tricks Performer ☐ Western Performer ☐ Whip Cracker
Group 2:
☐ Aerialist ☐ Angle Grinder ☐ Fire Breather ☐ Fire Dancer ☐ Fire Performer ☐ Knife Thrower ☐ Live Painter ☐ Other: _____ ☐ Pole Artist (Aerial, Chinese, Dance) ☐ Tightrope/Tightwire Performer (under 30 feet high)
Group 3:
☐ 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):

Annual gross revenue from previous year (performing revenue ONLY):				
☐ Up to $35,000	☐ Up to $100,000	☐ Up to $200,000	☐ Up to $300,000	☐ 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:
You checked the boxes above to best describe what you do. These boxes are in three groups. 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		
☐ Group 1	☐ **$304** (1-19 events) ☐ **$314** (20+ events)	☐ **$850** (1-19 events) ☐ **$860** (20+ events)
☐ Group 2	☐ **$326** (1-19 events) ☐ **$336** (20+ events)	☐ **$900** (1-19 events) ☐ **$910** (20+ events)
☐ Group 3	☐ **$408** (1-19 events) ☐ **$418** (20+ events)	☐ **$1,015** (1-19 events) ☐ **$1,025** (20+ events)
Premium cost – single event (up to 10 days)		
☐ Group 1	☐ **$149**	☐ **$420**
☐ Group 2	☐ **$171**	☐ **$470**
☐ Group 3	☐ **$253**	☐ **$585**
Commercial General Liability premium total:		**$**

Performer assistant(s) – optional coverage:	
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.	
Assistant description (attach additional pages if needed):	
Number of assistants you need the policy to cover ($100 per assistant):	
Performer Assistant premium total:	**$**

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**	**Option 2**
Coverage limits	$10,000	$25,000
Deductible for ALL losses	$500	$500
Premium cost	☐ **$242**	☐ **$455**
List your business personal property below (attach additional pages if needed):		
Inland Marine (business personal property) premium total:		**$**

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	☐ **$150**	☐ **$750**
Sexual Abuse and Molestation (SAM) premium total:		**$**

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:

Check: Please make checks payable to Specialty Insurance Agency. Mailing address: 3432 Denmark Avenue #231, Eagan, MN 55123.

Credit card: There is a 3.25% processing fee when paying by 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. There are **no refunds** for credit card fees.

Fire performers ONLY: Please initial the following statement:

_____ 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).

Read and sign:

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.

Applicant signature:	**Printed name:**	**Date:**

Application Confirmation

☐ By checking the "Application Confirmation" checkbox, you agree the information you have provided on this application is true and accurate, and you acknowledge this policy will only insure you, the individual, when performing. If other performers work with you, they will need their own policy. This checkbox confirms you are applying for our commercial general liability Performer insurance program with Specialty Insurance Agency. If the insured is a minor, under 18 years of age, a parent or legal guardian must sign this application.

You understand once coverage is bound and a certificate of insurance (COI) is issued, **no refunds** will be given. All sales are final at this point, even if you cancel coverage before the policy start date.