

Must be submitted with payment to FWSSR by December 1, 2018

**REQUEST FOR INSURANCE
(Tenant User Liability Insurance Program - TULIP)**

Named Insured: Southwestern Exposition & Livestock Show

Official Sponsor: _____

Date of request: _____

Date required by: December 1, 2018

Name of person completing form: _____

Phone: (_____) _____

Fax: (_____) _____

Coverage Provided: \$5,000,000 Per Event General Aggregate
 \$1,000,000 Each Occurrence
 \$1,000,000 Damage to Premises Rented to You (Any One Premises)

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1. Name of Event: 2019 Fort Worth Stock Show & Rodeo
 2. Tenant Name: _____
 3. Tenant Address: _____
 4. Move-In Date(s): January 13 – 17 (depending on location)
 5. Date(s) of event: January 18, 2018 – February 8, 2018
 6. Move-Out Date(s): _____
 7. Type of Event: Commercial Exhibits Trade Show
 9. Facility Contracted: Will Rogers Memorial Center, Fort Worth Texas

Please forward completed request and payment to:

Fort Worth Stock Show & Rodeo
Commercial Exhibits Department
PO Box 150
Fort Worth Texas 76101-0150
Email: exhibits@fwssr.com
Fax: 817 877 2499 fax

TO BE COMPLETED BY AMERICAN SPECIALTY

Tenant User Event Rate: \$100 Min. Prem. Total Premium: \$100.00 Check # _____

Representative: _____

Date: _____