



## Historical re-enactment Proposal form



This proposal form has been specifically designed for living history and historical re-enactment societies, individuals and historical event organisers.

If you have any questions please call The Insurance Partnership on **01482 388602** and speak with our re-enactor team.

Cancellation and abandonment cover is also available for event organisers – please call for further details.

**Please return this form to:**

Re-enactor Team  
The Insurance Partnership  
Partnership House  
Priory Park East  
Kingston Upon Hull  
HU4 7DY

Fax: 01482 213216

Or email back to us at [re-enactor@insurance-partnership.com](mailto:re-enactor@insurance-partnership.com)

This proposal form has been specifically designed by us for historical re-enactment societies, individuals and event organisers. Please complete your details and select the cover required.

## Your details

### Please select cover required

Historical re-enactment society  Individual  Event organiser

Name of society/  
individual/company

Correspondence  
address

Postcode

Telephone

Email

When would you like cover to start?

Number of events to be insured?  Annual turnover £

How many previous events have you organised?

Type of event (s) – Please give a detailed outline of the nature of the events, along with details of the activities undertaken at the events below.

### At the insured events:

Do any of your activities take place more than 5 metres above ground or floor level? Yes  No

### Do you use any of the following at the events insured?

Fireworks or pyrotechnic devices Yes  No

Black powder Yes  No

Pistols, cannons and guns Yes  No

Horses Yes  No

Archery Yes  No

Fairground rides, bouncy castles or any inflatable play equipment Yes  No

### For events that you organise:

Will the daily audience attendance exceed 500? Yes  No

If the event is staged over a number of days will the site be left unattended? Yes  No

Will adequate first aid be provided by suitably qualified staff in attendance? Yes  No

Has the permission of the local authority been sought and granted? Yes  No

Has the advice of the police and fire authorities been sought, and will both be present at the staging of the event? Yes  No

Will the erection of any staging and seating be carried out by suitably qualified professionals with their own insurance? Yes  No

If you have ticked any of the shaded boxes above, please give further details on the additional details sheet.

### Cover

#### Public liability

#### This is a compulsory cover

Limit of indemnity	Excess	Please select limit required
£2,000,000	£250	<input type="checkbox"/>
£5,000,000	£250	<input type="checkbox"/>

#### Employers' liability

#### This can only be bought with public liability

Limit of indemnity	Excess	Please select if required
£10,000,000	£0	<input type="checkbox"/>

Maximum number of employees and volunteers at each event

Please give details outlining the general tasks carried out by the employees to be covered under this section below.

#### Property damage

#### This can only be bought with public liability

Our standard policy for re-enactment societies includes cover for up to £5,000 for your property whilst at an event and whilst in transit to and from the event and £500 for individuals. If you require cover for an amount in excess of the standard policy cover please enter amount below.

Sum insured	Excess	Please select if required
£ <input type="text"/>	£150	<input type="checkbox"/>

**Property excluded from this cover; leased property hired by you to others; buildings; watercraft, aircraft or vehicles other than on display at the insured event; money; jewellery or watches with a market value more than £50; any form of data; animals; plants and marquees with a value of over £10,000.**

#### Personal accident

#### This can only be bought with public liability

Personal accident cover includes the following: death; loss of limb; loss of eye; loss of hearing; loss of speech and permanent total disablement.

Death and capital benefits	Excess	Please select if required
£40,000	£0	<input type="checkbox"/>

All persons to be insured must be between 16-70 years old.

Number of members in your society

#### Claims information

**Whilst organising or participating in an event, have you, any official, committee member or organiser:**



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Sustained any loss or damage or liability during the last five years, whether insured or not?

Yes  No

Had any insurance declined or cancelled or special terms imposed?

Yes  No

Have you, any official, committee member or co-organiser ever been convicted or charged but not yet tried for an offence other than a driving offence?

Yes  No

If Yes, please provide full details on the additional information sheet.

## Current insurance

If your insurance is not currently with Hiscox, please complete this section.

Who is you current insurer?

What is your current premium?

## Material information

Please provide us with details of any information which may be relevant to our consideration of your proposal for insurance. If you have any doubt over whether something is relevant, please let us have details.

## Data Protection Act

By signing this proposal form you consent to Hiscox using the information we may hold about you for the purpose of providing insurance and handling claims, if any, and to process sensitive personal data about you where this is necessary (for example health information or criminal convictions). This may mean we have to give some details to third-parties involved in providing insurance cover. These may include insurance carriers, third-party claims adjusters, fraud detection and prevention services, reinsurance companies and insurance regulatory authorities. Where such sensitive personal information relates to anyone other than you, you must obtain the explicit consent of the person to whom the information relates both to the disclosure of such information to us and its use by us as set out above. The information provided will be treated in confidence and in compliance with the Data Protection Act 1998. You have the right to apply for a copy of your information (for which we may charge a small fee) and to have any inaccuracies corrected.

## Declaration

I/We declare that (a) this proposal form has been completed after proper enquiry; (b) its contents are true and accurate and (c) all facts and matters which may be relevant to the consideration of our proposal for insurance have been disclosed.

I/We undertake to inform you before any contract of insurance is concluded, if there is any material change to the information already provided or any new fact or matter arises which may be relevant to the consideration of our proposal for insurance.

I/We understand that non-disclosure or misrepresentation of a material fact or matter will entitle Hiscox Insurance Company Limited to avoid this insurance.

I/We agree that this proposal form and all other written information which is provided are incorporated into and form the basis of any contract of insurance.

Signature of trustee, office bearer or individual member

Date

**A copy of this proposal should be retained for your records.**



## Historical re-enactment Proposal form



### Complaints

We pride ourselves on providing a first class, reliable and efficient service to all of our customers. Complaints are a key to monitoring our service and wherever possible, we seek to take action to prevent recurrence of a problem.

We define a complaint as any expression of dissatisfaction, whether oral or written, and whether justified or not, about a service or activity provided by the insurance company.

If you have a complaint, please contact your insurance broker in the first instance.

If your complaint cannot be resolved satisfactorily by your insurance broker, please contact our customer services team:

**Telephone:** 0870 084 3777

**Email:** [customerservices@hiscox.com](mailto:customerservices@hiscox.com)

**Address:**

Hiscox Insurance Company Ltd  
1 Great St Helen's  
London  
EC3A 6HX

All sections of cover provided under this product are underwritten by Hiscox Underwriting Ltd on behalf of Hiscox Insurance Company Limited.



## Historical re-enactment Proposal form



Additional information  
sheet: