



Golden State Bonsai Federation

www.gsbonsaifed.org

APPLICATION FOR GENERAL LIABILITY INSURANCE **April 1, 2024 - March 31, 2025**

This form may be filled out by hand or computer and mailed to us. Please do not use email.

Club Name: _____ Date: _____

Representative's Name: _____ Title: _____

Phone #: _____ Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Meeting Location Name: _____

Meeting Address: _____

City: _____ State: _____ Zip Code: _____

How often does your club meet?

Monthly Weekly Other (please specify) _____

Number of club members? (Approximate is ok) _____

Are you applying for an Additional Insured Policy? Yes No

(If yes, please complete the **Additional Insured Policy** form for each event requiring "Additional Insured")

This policy provides coverage for your club against any possible litigation whether at the regular club meeting location(s) or at another location where any club-sanctioned event takes place.

The **2024** premium is **\$150** for clubs with **50** members or fewer, and **\$3.00** per member for clubs with greater than fifty members. (e.g., If a club has 72 members, the cost is \$216 [$\3.00×72]).

Make checks payable to: GSBF and mail to: GSBF, P.O. Box 340694, Sacramento, CA 95834

Please contact Dodie Newman, Treasurer with any questions gsbonsaifed@gmail.com.

Check Number: _____ Date: _____

Applications for 1 or more policy postmarked after March 1, 2024 are subject to a single late fee of \$50 (except new member clubs.)