

**Diocese of Memphis TN**

**SPECIAL EVENTS  
COVERAGE**

**CATHOLIC MUTUAL GROUP**  
*serving the temporal needs of the church since 1889*

## WHAT IS SPECIAL EVENTS COVERAGE?

Special Events Coverage is a mechanism which allows the Diocese of Memphis to extend liability coverage to an individual or organization using parish facilities for a non-parish sponsored event. For a cost of \$95 per event, \$1,000,000 in liability coverage is extended to a non-parish sponsored facility user (lessee).

## WHEN SHOULD SPECIAL EVENTS COVERAGE BE UTILIZED?

Special Events Coverage can be used when a parish or other church institution is allowing an individual or organization to use its facilities for a non-parish sponsored activity. When determining whether or not an activity is parish sponsored, the following questions are helpful.

1. Does the parish have full control or final decision making authority over the function?
2. Do fees associated with the function flow through parish accounts?
3. If applicable, is the function open to all parish members?
4. Is the purpose of the function to facilitate learning, raise funds for the parish or to provide a social service on behalf of the parish?
5. Is the organizer or leader of the function a parish employee or volunteer?

Generally, if the answer to any of the above questions is “no”, the activity is not parish sponsored which means that the facility user needs to provide insurance which includes the Diocese and the parish as additional insureds.

**When it is determined that an activity is non-parish sponsored, there are two options:**

### **OPTION I**

The attached Facility Usage/Indemnity Agreement can be completed by the organization using parish facilities. This agreement requires \$1,000,000 in liability coverage, which must name your parish and the Diocese of Memphis as additional insureds.

### **OPTION II**

Special Events coverage can be purchased which will cover the individual or organization holding the activity, the parish, and the diocese.

## WHO IS ELIGIBLE FOR SPECIAL EVENT COVERAGE?

Special Events coverage is designed for the Diocese and parishes and can be extended to individuals and/or organizations (either profit or non-profit). Many individuals need this coverage for events such as private wedding receptions or family reunions. Non-profit organizations such as a charity organization may need the coverage for a pancake breakfast. A for-profit organization such as a local business may need the coverage for an employee Christmas party held on parish facilities.

## WHAT IS COVERED BY SPECIAL EVENTS COVERAGE?

Below is a brief explanation of what is covered by Special Events Coverage along with some items that are excluded. Please note that the actual coverage form must be examined for an exhaustive explanation of what is covered and excluded.

- Most non-parish sponsored activities are covered by Special Events Coverage. Common examples are wedding receptions, family reunions, awards banquets, and fund raisers.
- \$1,000,000 in liability coverage for bodily injury and property damage is provided for the special event user, parish, and the Diocese. Please note that the \$1,000,000 limit is shared by the covered parties and is a “per event” coverage.
- Coverage is available for overnight events at a cost of \$125 per event.
- Liquor liability coverage is provided.
- Some types of events are not covered, such as:
  - Any event lasting longer than 72 hours
  - Fireworks
  - Events involving more than 1,000 people
  - Events where admission is charged unless all proceeds go to charity
  - Events involving amusement rides or trampolines
  - Carnivals
  - Any event organized or run by a professional promoter
  - Sporting events including camps and tournaments
  - Events involving pool or lake activities
  - Events involving recreational vehicles
  - Events where guests bring their own alcohol (“BYOB”)
  - Political Rallies
  - Inflatable Amusement Devices (unless pre-approved/flat charge of \$250 applies)

## **HOW DO I COMPLETE AND PROCESS THE SPECIAL EVENTS APPLICATION FORM?**

The application form should be completed in full and must include the following information:

1. Name of Parish or Institution – Please include the name and address of the parish or facility where the event will be held.
2. Lessee Information (additional insured) – Please include the name of the individual(s) or organization holding the non-parish sponsored event.
3. Lessee (additional insured) Contact Person – Please indicate the name, address, and telephone number of the person primarily responsible for the activity.
4. Type of Activity – Please provide a brief description of the activity including the date, time, approximate number of participants, whether or not food and/or liquor is being served.
5. Processing the Completed Application – One copy of the application should be given to the lessee, another retained for your records, and the original submitted to Catholic Mutual with a PARISH CHECK made out to Catholic Mutual Group. The original application should be submitted at least 15 business days prior to an event.

Any questions regarding the completion or processing of the application should be directed to Rebecca Bryant at Catholic Mutual Group, 800-228-6108, Ext 2333.

## **ARE THERE RISK MANAGEMENT GUIDELINES TO ASSIST MY PARISH IN ALLOWING OUTSIDE USE OF ITS FACILITIES?**

Risk Management Guidelines are available to assist your parish in allowing outside organizations to use your facilities. Information includes, but is not limited to, liquor liability control, security, and food handling. Please contact Catholic Mutual's Risk Management Department at (800) 228-6108 for further information.

**DIOCESE OF MEMPHIS-746**  
**APPLICATION FOR SPECIAL EVENTS COVERAGE**

Name of Parish or Institution: \_\_\_\_\_

Date of Event: \_\_\_\_\_

**NOTE: CATHOLIC MUTUAL MUST RECEIVE APPLICATION AT LEAST 15 DAYS PRIOR TO EVENT. DO NOT SUBMIT APPLICATIONS MORE THAN 6 MONTHS IN ADVANCE.**

Street (Physical) Address (NO P.O. BOXES): \_\_\_\_\_

Type of Special Event (Example: wedding reception, anniv. party, etc. If event is a fundraiser, please be specific about what is occurring): \_\_\_\_\_

City/State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Phone No.: \_\_\_\_\_

**Lessee (Additional Insured) Information:**

Name of Sponsoring Organization or Individual Requesting Coverage \_\_\_\_\_

Time of Event: From \_\_\_\_\_ To \_\_\_\_\_

*(Please Print Lessee Name(s) or Organization)*

Approximate Number of Participants: \_\_\_\_\_

**Lessee (Additional Insured) Contact Person:**

Is Liquor Being Served? \_\_\_\_\_

Name: \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_

Street Address: \_\_\_\_\_

Is Food Being Served? \_\_\_\_\_

City/State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Yes \_\_\_\_\_ No \_\_\_\_\_

Telephone: \_\_\_\_\_

**PLEASE BE SURE TO COMPLETE EACH REQUIRED FIELD IN THE TOP PORTION OF THIS FORM.  
FAILURE TO DO SO MAY RESULT IN A DELAY OR DENIAL OF COVERAGE.**

The Special Events coverage provides \$1,000,000 Combined Single Limit Bodily Injury, Property Damage, and Host Liquor Liability coverage per event (not per claim).

This coverage is underwritten by **Great American Assurance Company, Policy No. on file with C.M.G. Agency, Inc.**

Cost of Coverage:     \$95     Per Event      (Overnight Stays - \$125)

**COVERAGE DOES NOT APPLY TO CERTAIN EVENTS, SUCH AS, BUT NOT LIMITED TO:**

- \* Sporting events including tournaments & camps
- \* Amusement rides, including mechanically operated devices, trampolines, & rebounding devices
- \* Events where a fee or admission is charged, unless all proceeds go to charity
- \* Events with attendance of more than 1,000 persons
- \* Events involving pool or lake activities
- \* Events involving 'BYOB' (Bring your own bottle)
- \* Any carnival event
- \* Fireworks & fireworks displays
- \* Events organized or operated by professional promoters/performers
- \* Events which exceed 72 hours in duration
- \* Events involving recreational vehicles
- \* Political Rallies
- \* Inflatable Amusement Device (unless pre-approved/flat charge of \$250 applies)

**NOTIFICATION OF AN EVENT MUST REACH CATHOLIC MUTUAL  
AT LEAST 15 DAYS IN ADVANCE OF THE EVENT.**

**★ SUBJECT TO APPROVAL BY C.M.G. AGENCY, INC. ★**

*Please make Parish Check payable to: Catholic Mutual Group*

**COMPLETE AND RETURN THIS FORM TO:      Catholic Mutual Group  
10843 Old Mill Road  
Omaha, NE 68154**

*Please report all claims to C.M.G. Agency, Inc. Claims Department at 1-800-228-6108.*

**Approving Location: OMAHA, NE      ATTN: MEMBER SERVICES  
FAX NO.: 402-551-2943**

*DISTRIBUTION: Original: C.M.G. Agency, Inc., Copies to Lessee and Parish or Institution*

# Catholic Mutual. . . “CARES”

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## FACILITY USAGE/INDEMNITY AGREEMENT

The Facility Usage/Indemnity Agreement must be used when non-parish sponsored or affiliated groups use parish facilities on a short-term basis such as one day or a week. The following groups are examples of non-parish sponsored or affiliated groups that should sign the Facility Usage/Indemnity Agreement:

1. Girl Scouts, Knights of Columbus, American Legion or other similar organizations that use parish facilities for meetings or fundraisers.
2. AAU sport teams or non-parish sponsored sport classes/clinics.
3. Parishioner and non-parishioner families that rent or use parish facilities for wedding receptions, family reunions, anniversary parties or other similar activities. (In lieu of signing the Facility Usage/Indemnity Agreement, a parishioner or non-parishioner family would be eligible to purchase “special event” liability coverage through your parish via Catholic Mutual.) Please note that funeral luncheons are parish sponsored events.
4. Any other organization, municipality or county organization that uses parish facilities for a meeting or function that is non-parish sponsored.

The Facility Usage/Indemnity Agreement requires the facility user to provide the parish with a certificate of insurance documenting general liability coverage in the amount of \$1,000,000 per occurrence. This certificate of insurance must name your parish and the Arch/Diocese as an additional insured. It is not adequate to obtain a certificate of insurance, which names the parish as a “certificate holder.”

It is often asked what criteria an organization must meet to be parish sponsored or affiliated. In the event of an insurance claim involving a potential non-parish sponsored activity, the following questions would be asked to further determine if a group was parish sponsored and eligible for insurance coverage:

1. Did the parish have full control over the group or function?
2. Did any costs or fees associated with the function flow through parish accounts?
3. Was the function or group open to all parish members?
4. Was the purpose of the function or group to facilitate learning, raise revenue for the parish or provide a social service on behalf of the parish?
5. Was the teacher or leader of the group a parish volunteer or employee?

In general, a group which does not meet the definition of an affiliated organization or is unable to answer the above five questions in the affirmative would not be parish sponsored. Accordingly, that group must sign the Facility Usage/Indemnity Agreement and supply the parish with the necessary insurance documentation.

# **FACILITY USAGE/INDEMNITY AGREEMENT**

PARISH\* : \_\_\_\_\_

\*PARISH is understood to include the Diocese of Memphis

FACILITY USER: \_\_\_\_\_

DATES OF FACILITY USAGE: \_\_\_\_\_

TYPE OF FACILITY USAGE: \_\_\_\_\_

The above named FACILITY USER agrees to defend, protect, indemnify and hold harmless the above named PARISH against and from all claims arising from the negligence or fault of the above named FACILITY USER or any of its agents, family members, officers, volunteers, helpers, partners, organizational members or associates which arise out of the above identified FACILITY USAGE at the above named PARISH.

FACILITY USER agrees to provide a certificate of insurance to the PARISH, which provides evidence of general liability coverage of not less than one million dollars (\$1,000,000) per occurrence. FACILITY USER also agrees to have the PARISH named as an "Additional Insured" on its general liability policy for the DATE(S) OF FACILITY USAGE in relationship to the TYPE OF FACILITY USAGE for claims which arise out of FACILITY USER'S operations or are brought against the PARISH by FACILITY USERS' employees, agents, partners, family members, students, customers, function attendees, guests, invitees, organizational members or associates. FACILITY USER also agrees to ensure that its liability insurance policy will be primary in the event of a covered claim or cause of action against PARISH.

If and only if FACILITY USER fails to comply with the above (second) paragraph, then the above named FACILITY USER agrees to protect, defend, hold harmless and fully indemnify the above named PARISH for any claim or cause of action whatsoever arising out of or related to the usage which takes place during the above identified DATE(S) OF FACILITY USAGE that is brought against the PARISH by the above named FACILITY USER or its employees, agents, partners, family members, students, customers, function attendees, guests, invitees, organizational members or associates, even if such claim arises from the alleged negligence of the PARISH, its employees or agents, or the negligence of any other individual or organization. If any sentence or paragraph of this agreement is held invalid, it is agreed that the balance thereof, shall continue in full legal force and effect.

SIGNED BY: \_\_\_\_\_  
(Must be an official agent of FACILITY USER)

NAME (Please print): \_\_\_\_\_

DATE: \_\_\_\_\_  
FACUSAG (2/07)