

\$275

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**PHEASANTS FOREVER CHAPTERS
LIQUOR LIABILITY COVERAGE FOR SPECIAL EVENTS**

FOR EVENTS TO BE HELD FROM NOVEMBER 24, 2006 to NOVEMBER 24, 2007

PHEASANTS FORVER HAS OBTAINED LIQUOR LIABILITY COVERAGE FOR CHAPTERS' SPECIAL EVENTS AT SUBSTANTIALLY REDUCED PRICES.

WHEN IS THIS LIQUOR LIABILITY COVERAGE REQUIRED?

Chapters should obtain this coverage in the following situations: (1) The event will be held at a location that does not have a liquor license or liquor liability insurance (ex. community centers, town halls, etc.), or, (2) the chapter will be selling, distributing or otherwise profiting from the sale of alcohol. In situations where the event will be held at a facility that is licensed and insured to sell alcohol, and the chapter will not be distributing, receiving a percentage of the bar sales, or otherwise profiting from the sale of alcohol, this coverage is not required.

HOW DOES THE CHAPTER OBTAIN THE INSURANCE?

Chapters can obtain this coverage by sending their payment along with the bottom portion of this flyer to: **RJF AGENCIES, INC. 14601 27th Avenue No, Suite 104 Minneapolis, MN 55447.**

WHAT IS THE COST OF THE INSURANCE?

Coverage for the policy period **November 24, 2006 to November 24, 2007** is available for **\$275 PER EVENT.** This policy is issued by St. Paul Companies and provides \$1,000,000 of liquor liability coverage.

WHAT IS THE DEADLINE FOR OBTAINING THE INSURANCE?

Chapters can obtain coverage at any time during the policy period, however, **PAYMENT MUST BE RECEIVED BY RJF AGENCIES, INC. PRIOR TO COVERAGE BEING BOUND.**

WHAT ELSE SHOULD THE CHAPTER DO?

It is recommended that Chapters utilize professionally trained and experienced bartenders whenever possible. It is also recommended that the Chapter obtain evidence that the bartender has completed liquor awareness training.

ADDITIONAL QUESTIONS?

Chapters that have additional questions about this policy, or questions about when the coverage is required should contact Colleen Johnson at RJF AGENCIES, INC. (763) 746-8524.



(return this portion along with your payment to the address below)



PHEASANTS FOREVER CHAPTER LIQUOR LIABILITY COVERAGE

CHAPTER _____ # _____

CONTACT NAME _____

ADDRESS _____

PHONE # _____ FAX # _____

EVENT DATE _____

FACILITY NAME _____

ADDRESS _____

WHERE SHOULD THE CERTIFICATE BE FAXED OR MAILED?

MAKE CHECK PAYABLE TO AND MAIL TO:

RJF AGENCIES, INC.
14601 27th Avenue No., Suite 104
Minneapolis, MN 55447

NOTE: COVERAGE WILL NOT BE PROVIDED WITHOUT PAYMENT

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