

2018 Elks Krewe of Orleanians Insurance Application

MAIL TO or Drop Off: (M-F 9:00-3:00)

ARCERI & ASSOCIATES
2017 TRANSCONTINENTAL DRIVE
METAIRIE, LA 70001

CONTACT:

Chris Arceri, Agent or Melissa Hillburn
504-484-6393 Office / 504-553-7680 Chris' Cell
chris@arceri-insurance.com or melissa@arceri-insurance.com

REQUIRED COVERAGE FOR MARDI GRAS DAY

**\$1,000,000 LIABILITY; \$5,000 ACCIDENT MEDICAL EXPENSE,
\$10,000 ACCIDENTAL DEATH & DISMEMBERMENT**

TOTAL PREMIUM ON COVERAGE \$ 635

OPTIONAL COVERAGES

1.) **ADDITIONAL MEDICAL**

FOUR (4) WEEK MEDICAL COVERAGE

3 WEEKS BEFORE PARADE DAY AND ONE WEEK AFTER PARADE..... **\$ 35**

EXCLUDING MARDI GRAS DAY

2.) **YEAR ROUND LIABILITY COVERAGE**

YEAR ROUND OL&T (**PREMISES ONLY**) LIABILITY ON PARKED TRAILER

\$1,000,000 WITH \$500 DEDUCTIBLE **\$ 110**

(IF OPTION 2 SELECTED - YEAR ROUND LIABILITY COVERAGE YOU MUST LIST THE LOCATION.)

*LOCATION OF PARKED FLOAT OR TRAILER: _____ *

TOTAL PREMIUM FOR COVERAGES: _____

NO CHECKS ACCEPTED AFTER DECEMBER 31, 2017 – MONEY ORDERS OR CASH

Checks made payable to Arceri & Associates

***** \$20.00 Late Fee AFTER January 9, 2018 *****

NSF FEE ON RETURN CHECKS - \$20.00

Name of Club: _____ **E-MAIL:** _____

Club Captains Name: _____ **Phone #:** _____

Address: _____ **City:** _____ **Zip Code:** _____

Truck/Tractor Owner: _____ **Phone #:** _____

Address: _____ **City:** _____ **Zip Code:** _____

Flatbed

Trailer Owner: _____ **Phone #:** _____

Address: _____ **City:** _____ **Zip Code:** _____

Office Use Only

Cash: Check: # _____ M.O.: # _____ DWOLLA: **TRUCK #:** _____

IMS Certificate: emailed / given / mailed - _____