



Registered Charity: 1154232

## LIABILITY INSURANCE DECLARATION

<b>Name of Company/Organisation/Event</b>	
<b>Contact Address</b>	

Please provide us with details of your current insurance protection. Please return the form to:-  
 Mrs C M Hamlin at The Willows, Hobbs Hill Lane, High Legh, Cheshire, WA16 0QZ or  
 Email to [treasurer@lymmfestival.org.uk](mailto:treasurer@lymmfestival.org.uk).

<b>Public Liability</b>	Insurer:	
	Policy Number:	
	Period of cover from/to:	
	Limit of Indemnity:	
	Confirm premium has been paid:	

<b>Employer's Liability</b>	Insurer:	
	Policy Number:	
	Period of cover from/to:	
	Limit of Indemnity:	
	Confirm premium has been paid:	

Signed.....

Name.....

Date.....

Status.....