



SPYA MEMBER APPLICATION

Coverage provided:
- Up to \$250,000 CND of Rented Equipment at anyone time subject to a \$2,500 deductible and
- \$2,000,000 CND Commercial General Liability

There is no coverage for equipment that is owned by the member nor for equipment designed for aerial photography or operations thereof.

1. Member's Name : _____

2. Address: _____

3. Director: _____ Producer: _____ Manager: _____

4. Experience of Applicant & Director (examples): _____

5. Title of Production: _____

a. Type of project (Short, Documentary, Music Video, Etc...) _____

b. Storyline & action sequences + provided synopsis / treatment: _____

6. a. Type of filming (outdoors/indoors/terrain/any special hazards, ie underwater/overwater): _____

b. Describe all special stunts, scenes involving animals, motorcycles, special vehicles, boats, aircraft, explosives or any special hazardous Activity: _____

c. Location (City & Province) and number of weeks at each: _____

d. Will any of the filming be done outside of Canada ? If yes, describe and include estimated duration: _____

7. Production Schedule:

Number of individual days that you will be requiring insurance : _____

AND

Date Period (s) of Principal Photgraphy : _____ to _____

If shooting in non-consecutive days provide dated of filming (example 3 weekends over the course of 5 months period)

Dates of Principal Photography : _____ to _____

Dates of Principal Photography : _____ to _____

Dates of Principal Photography : _____ to _____

Dates of Principal Photography : _____ to _____



8. Total Budget :
 (Please attach Budget) \$ _____

(Up to \$250,000) RENTED EQUIPMENT:

- Location to which equipment is returned when not in use: Locked in secure hotel/ boarding house
- Indicate Inventory Control Methods and who is responsible: Gear checks before and after use
- How will equipment be transported? Car

List of parties that will be requiring proof of insurance :

Name (Individual or rental house)	Address	Replacement value of equipment being rented
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(\$2 million) LIABILITY:

Shooting Locations :

Legal Name	Address
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

I/We have read the above and agree that the best of my/our knowledge and belief same fully represents the true statement of facts.

Date: _____ **Member Signature :** _____