



# Golden State Bonsai Federation

[www.gsbonsaifed.org](http://www.gsbonsaifed.org)

## APPLICATION FOR GENERAL LIABILITY INSURANCE

**April 1, 2025 - March 31, 2026**

This form may be filled out by hand or computer and mailed to us.

Club Name: \_\_\_\_\_ Date: \_\_\_\_\_

Representative's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Meeting Location Name: \_\_\_\_\_

Meeting Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

How often does your club meet?

Monthly       Weekly       Other (please specify) \_\_\_\_\_

Number of club members? (Approximate is ok) \_\_\_\_\_

Are you applying for an Additional Insured Policy?  Yes  No

(If yes, please complete the **Additional Insured Policy** form for each event requiring "Additional Insured")

This policy provides coverage for your club against any possible litigation whether at the regular club meeting location(s) or at another location where any club-sanctioned event takes place.

The **2025** premium is **\$150** for clubs with **50** members or fewer, and **\$3.00** per member for clubs with greater than fifty members. (e.g., If a club has 72 members, the cost is \$216 [ $\$3.00 \times 72$ ]).

Make checks payable to: GSBF and mail to: GSBF, P.O. Box 340694, Sacramento, CA 95834

Please contact Dodie Newman, Treasurer with any questions [gsbonsaifed@gmail.com](mailto:gsbonsaifed@gmail.com).

Check Number: \_\_\_\_\_

Date: \_\_\_\_\_

Applications for 1 or more policy postmarked after March 1, 2025 are subject to a single late fee of \$50 (except new member clubs.)