

Certificate Of Insurance

PLEASE RETURN VIA EMAIL: KaylaD@mpeshows.com

TO BE COMPLETED BY THE INSURER OR THEIR AUTHORIZED REPRESENTATIVE

Name of Insured: Address of Insured:					
General Liability					\$
Excess Liability (if applicable)					\$
– Completed Operations,	Cross Liability Clause an <mark>rden Show and Market</mark>	d Severability of I	Interest Clau ., have each	use. I <mark>been added as an a</mark>	tomobile Liability, Products
	Policies of Insurance as	·			signed to the name insured
=	cified herein for any rea				Marketplace Events LLC, as ays prior written notice by
Winnipeg Home + Garden Show Marketplace Events LLC P.O. Box 70060 Rimrock Plaza PO Toronto, ON M3J 0H3 Phone: 403.253.1177 Toll Free: 866.941.0673					
Date:			Name of Insurance Company (NOT Broker):		
Name of Insurance Broker:			Authorized by Representative:		