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TOLL FREE: 1-800-670-1877 WEBSITE: www.capri.ca EMAIL: reception@capri.ca

Dear Manitoba Horse Council Member Association:

As you may already be aware, the Board of MHC has selected Capri Insurance as the official insurance provider to their membership effective January 1, 2017

Capri Insurance has a long history of delivering products and services developed exclusively for the equine industry and we are confident that our work with the MHC in the months and years to come will strengthen the equine community in Manitoba.

As our newest Provincial Equine Association Partner, member equine associations, saddle clubs etc. of MHC can apply for low cost broad insurance to cover their activities throughout the year.

1. Liability Insurance for Club Activities

- ✓ Club Insurance is for member groups of the Manitoba Horse Council **and** whose active riding or driving members are also individual members of MHC.
- ✓ The coverage is for all "approved" activities as declared on the attached form.
- ✓ Coverage may be extended to occupancy of land/buildings, and the operation or maintenance of equine facilities where you own, rent or maintain land/building(s) for more than 15 consecutive days
- ✓ The Insurance price starts at only \$350. And provides:
 - **\$5,000,000** Commercial General Liability "Club" Insurance – including coverage for Injury to Participants
 - **\$1,000,000** Tenant Legal Liability for rented premises
 - **\$50,000/\$250,000** Care, Custody & Control coverage for non-owned animals
 - **\$10,000** coverage provided for owned Property other than buildings (tack & equipment etc.)
 - **\$2,000** on owned Money

2. Directors & Officers Liability

- ✓ Directors & Officers Liability protects directors and their personal assets from law suits brought against them for their actions as a director of the Club. The cost of this insurance coverage is shown on the enclosed application form.

Capri Insurance provides coverage to over 100,000 individuals directly thru the PSO partner program from coast-to-coast. Our full staff of equine insurance specialists are at your disposal to answer any questions concerning these programs or any other insurance matters.

Insurance coverage for all your equestrian needs – insurance for horses & their people – it's what we do!

Sincerely,

Michael A. King, CAIB, R.I.B.



CAPRI INSURANCE SERVICES LTD. OFFICES IN:
KELOWNA, VERNON, KAMLOOPS, LAKE COUNTRY, WEST KELOWNA, PENTICTON, PRINCE GEORGE





2018 APPLICATION for Equine Association CLUBS



(BE A MEMBER & RENEW EARLY - CLUB INSURANCE EXPIRES JANUARY 01 EACH YEAR)

Membership in your Provincial Equine Association (PTSO) enables you to apply for low cost broad coverage on all your Club's activities throughout the year

Capri and Intercity Insurance are the official insurance broker's of most Equine Associations in Canada.
Questions about this Insurance Program must be directed to Capri or Intercity .

1. Liability Insurance for Club Activities

- Ø Club insurance is for Clubs who are members of their Provincial Equine Association (PTSO) **and** whose active riding or driving members are also members of their PTSO.
- Ø The coverage is for all "**approved**" activities. "Approved" activities are those that you declare on the attached form which are reviewed by Capri or Intercity Insurance.
- Ø Coverage may be extended to the actual ownership of land/buildings, and the operation or maintenance of equine facilities where you own, rent or maintain land/building(s) for more than 15 consecutive days (see application form).
- Ø The Insurance price starts at only \$350. and provides:
 - \$ 10,000. on owned Property other than buildings (higher limits available)
 - \$ 50,000. per Horse, \$250,000. per incident/aggregate if liable for horses of others in your custody
 - \$ 1,000,000. on Tenant Legal Liability on responsibility for rented premises
 - \$ 5,000,000. on Club World Wide Liability including Injury to Participants
- Crime coverage as follows:
 - \$ 10,000. Employee Dishonesty – Form A
 - \$ 2,500. Broad Form Money & Securities
 - \$ 2,500. Money Orders and Counterfeit Paper Currency
 - \$ 2,500. Depositors Forgery

If you want this very broad special insurance complete and return the attached application.

2. Management Liability (also known as Directors & Officers Liability) is a special coverage available separately to Clubs who submit a Management Liability Application. If you currently do not have coverage, please contact our office for more information.

- Ø The cost of the "Management Liability" coverage is always affordable.
- Ø Management Liability protects directors and their personal assets from law suits brought against them for their actions as a director of the Club.

NOTE: Remember to enclose your payment as coverage cannot be made effective until we have received the Application Form(s) and the Premium Payment.

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT:

WESTERN PROVINCES & TERRITORIES:

CAPRI INSURANCE SERVICES LTD.
100 – 1500 HARDY STREET, KELOWNA, BC V1Y 8H2
Phone Toll Free 1-800-670-1877 Fax 1-888-822-6115
Website: www.capri.ca/horse
Email: agri@capri.ca

PROVINCES ONTARIO EASTWARD:

INTERCITY INSURANCE SERVICES INC.®
15221 YONGE STREET, AURORA, ON L4G 1L8
Phone Toll Free: 1-888-394-3330 Fax: 1-888-822-6115
Website: www.intercityinsurance.com
Email: forms@equicare.ca



2018 EQUINE CLUB APPLICATION



Name of Club _____

Address _____ City _____ Prov _____

Postal Code _____ Home # () _____ Cell # () _____ Fax # () _____

Contact Name _____ Email _____

- Are you an Umbrella Organization with Regional Groups under your control?
If "yes" please contact our office for the "Affiliate/Branch Supplement" Yes No
- The Club is current and a member of their Provincial Equine Association (PTSO):
* **Important Note – Membership is required in order for insurance coverage to be valid** * Yes No
- Are "ALL" members of your organization who ride or drive in Club organized activities also members in good standing of a Provincial Equine Association (PTSO)? **** Required for coverage! **** Yes No
Note: Non-Club members and/or Therapeutic riders can participate in Club organized riding or driving activities without being PTSO members.
- Indicate "ALL" of the Club's activities (use separate page if required): Member Rides Clinics Lessons
 Competitions Social Events Meetings Exhibitor at Trade Shows Club Auctions Facility Rental
Describe fund raising activities _____
Describe all other activities _____

*** IMPORTANT NOTE: COMMERCIAL TRAIL RIDES AND PONY RIDES ARE EXCLUDED ACTIVITIES ***

- Do you build, clear or maintain any trails, whether owned or non-owned? Yes No
If you answered "yes" to question 5, does this consist **only** of the clearing of debris, branches, rocks to ensure a safe equine ride? **** If "no" please contact our office **** Yes No
- Any Food/concession sales? Yes No If "Yes" describe _____ Revenue \$ _____
- Do you serve a/o sell alcohol? Yes No If "Yes" describe _____ Revenue \$ _____
- Do you hold rough stock events/activities? Yes No
- Prior Insurance: Name of Insurance Company _____
Has any Insurance Company cancelled or refused coverage? Yes No If 'yes', explain: _____
- Claims History (past 5 years) Date of Loss Description Amount Paid
 None OR _____ \$ _____
- Additional Insured: Please provide the **NAME** and **ADDRESS** of those who specifically need to be added to the policy.
(use a separate page if more than one additional insured is required):
Legal Name: _____
Mailing Address: _____

Club Insurance Package and \$5,000,000. Liability including injury to participants	Base Premium =	\$ 350
12. We own, rent or lease premises for periods longer than 15 consecutive days for the purpose of conducting equine activities? If "yes" then you MUST add a or b below	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Which best describes the facilities you <u>own/rent/lease</u> for equine activities:		
a. Premises for equine activities (may include Boarding of <u>up to 10 horses</u> belonging to other people, other than at a Show, Clinic or Lesson	Add \$150 =	\$ _____
b. As above but Boarding of <u>More than 10 horses</u> belonging to other people, other than at a Show, Clinic or Lesson	Add \$450 =	\$ _____
Plus Chapters/Affiliates/Sub-Groups: Premium is \$50 for each.	x \$50 =	\$ _____
NOTE: If policy is cancelled, the Minimum Retained Premium is \$350 or 50% of the calculated premium, whichever is greater.	Total Insurance Cost =	\$ _____
** POLICY COVERAGE EXPIRES JANUARY 1, 2019 **	ADD PST IF APPLICABLE =	\$ _____
	TOTAL including PST (if applicable) =	\$ _____

Applicant Signature: _____ Date Signed: _____

Title: _____

NOTE

- Payment is required in order to make coverage effective.
- Cheques must be payable to Capri Insurance Services Ltd. OR Intercity Insurance Services Inc. OR pay by credit card:

Visa MasterCard AmEx Expiry Date (mm/yy) _____ Card # _____

Card Holder's Name (Please Print) _____ Card Holder's Signature _____

**** Do you want your policy emailed OR mailed? ****

****COVERAGE IS NOT EFFECTIVE IF THIS APPLICATION IS NOT FULLY COMPLETED & SIGNED****



EQUINE CLUB Frequently Asked Questions



- Q1. Is there a problem with the insurance if we let someone participate in a show who is not a club member and/or not a member of a provincial equestrian association?
- A1. No. The insurance allows for non-club members and non-equine association members to participate in your activities or shows (remember, the insurance covers you not them). It is, however, a good risk management strategy and a recommendation that wherever practical you should confirm that people participating in your events have their own insurance. It is also essential that your own club members also be members of your provincial equestrian association (see next question).
- Q2. Will our insurance be affected if it is found that not all of our participating club members are provincial association members?
- A2. Possibly. It is a condition of this insurance that all your club members who are active riding or driving members will also be provincial association members. This does not apply to social or honorary members who no longer ride or drive in club associated activities. If a loss occurs involving one of your active riding or driving club members and it is found that they are also not a member of your provincial equestrian association, then your insurance may become null and void. Clubs can submit membership rosters to their provincial equestrian association office to obtain confirmation of their member's status.
- Q3. Our club is allowed to use municipal properties to hold events from time to time, but we are asked to add the municipality to our insurance. Can we do this and does it cost extra?
- A3. These groups are automatically added to your policy at no additional premium. The policy states that owners of private or public land are added as additional insureds with respect to losses arising out of the activities of the club on those lands.
- Q4. Is there any exclusion or restriction if our club sells or serves alcohol at a club function or activity?
- A4. The sale or service of alcohol at any event requires special attention. Please contact our office to discuss the appropriate coverage.
- Q5. Clubs can conduct clinics using an instructor who is not formally certified. How do you determine if the instructor's competence or experience is sufficient to satisfy the insurance program requirements?
- A5. The instructor used by clubs to conduct a clinic must meet the following criteria to enable the club to be covered for the clinic exposure. The instructor should have conducted similar clinics in the past or be recognized in the equestrian industry for his or her expertise on the topic of the clinic. Generally clubs have some discretion in this area to assist them and it is recognized there would be little value in conducting a clinic using an instructor who had little to offer. Also the clinic setting is usually of short duration and in a controlled setting allowing for this discretionary benefit.
- Q6. I have been told that liability insurance for clubs covers directors. Why then is Director's & Officer's coverage discussed so much and sold separately? What is this all about?
- A6. The club's Commercial General Liability policy responds to law suits which result from a bodily injury or a property damage in which it is felt the club bears some responsibility. Your policy covers this and also covers directors and others associated with hosting club activities for these types of claims. However there are other things for which a director or officer may be sued which have nothing to do with a bodily injury or a property damage. Typically these law suits are the result of a wrongful act by a director and are filed by another director, club member or a financial institution. Director's and Officer's policies are separate policies with specialized wordings to deal with these situations.

(Jan 1/18)



**EQUINE ASSOCIATION CLUBS
MANAGEMENT LIABILITY**



(BE A MEMBER & RENEW EARLY - INSURANCE EXPIRES JANUARY 1st EACH YEAR)

Capri and Intercity Insurance are the official insurance broker's of most Equine Associations in Canada.

Questions about this Insurance Program must be directed to Capri or Intercity.

- Ø Coverage is available for Directors and Officers of member Clubs that are registered societies and members in good standing of their Provincial Equine Association.
- Ø Management Liability is a special coverage available separately for member Clubs who qualify and apply using the attached application form.
- Ø Management Liability protects directors and their personal assets from law suits brought against them for their actions as directors of a Club. Please review the information provided under "Frequently Asked Questions".
- Ø Please complete and sign the attached Application Form and return it to Capri or Intercity Insurance. Note that coverage is not effective until we receive the fully completed and signed Application form; the Application has been reviewed and accepted by underwriters; and the premium fully paid.

WESTERN PROVINCES & TERRITORIES:

CAPRI INSURANCE SERVICES LTD.
100 – 1500 HARDY STREET, KELOWNA, BC V1Y 8H2
Phone Toll Free 1-800-670-1877 Fax 1-888-822-6115
Website: www.capri.ca/horse
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PROVINCES ONTARIO EASTWARD:

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Website: www.intercityinsurance.com
Email: forms@equicare.ca

**NON-PROFIT MANAGEMENT AND CORPORATE LIABILITY INSURANCE POLICY
EQUINE D&O PROGRAM – NEW BUSINESS APPLICATION**

THIS IS AN APPLICATION FOR A CLAIMS MADE POLICY WITH DEFENCE COSTS INCLUDED IN THE LIMIT OF LIABILITY. ALL QUESTIONS MUST BE ANSWERED.

Corporate Information

1. (a) Name of Parent Corporation (Applicant): _____
- (b) Address: _____
- (c) Date of Incorporation: _____ Jurisdiction: _____
- (d) Select desired limit: \$1,000,000 \$2,000,000 \$3,000,000 \$4,000,000 \$5,000,000
- (e) If a Policy is issued, do you want to receive it by: Regular Mail E-mail
- (f) Phone #: _____ Email: _____

Operational Activities

2. (a) Description of operations: _____
- (b) Does the Corporation have the right to appoint more than 50% of the board members of any affiliated (ie. not owned) entity?
Yes No
- (c) Percentage of the services provided or activities performed outside of Canada: _____%
- (d) Number of volunteers: _____. Number of employees located in: Canada: _____ Other Countries: _____
- (e) Are any layoffs or staff reductions of employees anticipated within the next two years? Yes No
- (f) Does the Corporation have written employment guidelines, policies and procedures? Yes No
- (g) Is authorization from an officer required prior to terminating an employee? Yes No

If yes to (b) or (e) above, attach details. If no to (f) or (g) above, describe alternate controls.

Financial Information

3. (a) If the Corporation holds a charitable status, has this status ever been revoked or been subject to review?
Yes No
- (b) Is the Corporation currently, or has it at any time during the past three years been, in arrears in its payments to the Canada Revenue Agency or the provincial ministries of revenue (including source deductions, G.S.T, H.S.T. and P.S.T)?
Yes No
- (c) Is the Corporation currently, or has it at any time during the past three years been, in breach of any of its debt covenants or loan agreements, or does it anticipate any such breach occurring within the next twelve months?
Yes No

If yes to any of the above, attach details.

4. For the most recent consolidated fiscal year-end provide the following financial information for the Corporation:
 - (a) Year-end Date: _____ (b) Total Cash: \$ _____ (c) Total Revenues: \$ _____
 - (d) Net Income: \$ _____ (e) Total Assets: \$ _____ (f) Total Liabilities: \$ _____
5. Provide details of any Directors' and Officers' liability insurance policy currently held (or check here if none)

Name of Insurer	Limit of Policy	Deductible	Expiry Date	Premium	Claims (Y/N)

**If you answered "Y" above to Claims, please provide the amounts paid and details.*

Past Activities

6. During the past three years, has the Corporation or any person(s) applying for this insurance been involved in:
 - (a) receipt of any declination, cancellation or non-renewal of any insurance similar to that now applied for?
Yes No
 - (b) giving or delivering written notice under the provisions of any Directors' and Officers' or Employment Practices liability insurance policy of any claim, or notice of potential claim?
Yes No

- (c) any claim, which has been made or is now pending, which would fall within the scope of an insurance policy similar to that now proposed if such insurance had been in force? Yes No
- (d) any claim where loss payments have been made under any insurance policy similar to that now proposed? Yes No
- (e) any anti-trust, combines, price fixing, restraint of trade, tax, copyright or patent infringement proceeding? Yes No
- (f) any civil, criminal, administrative or regulatory investigation or proceeding? Yes No
- (g) any pollution suits or claims Yes No
- (h) any receivership or insolvency or bankruptcy proceeding? Yes No

If yes to any of the above, attach details.

THE APPLICANT DOES HEREBY PROVIDE THE FOLLOWING WARRANTY TO THE INSURER

7. Does the Corporation or any director, officer or any other person proposed for this insurance have knowledge or information of any fact, circumstance or situation which could reasonably give rise to a claim which would fall within the scope of the proposed insurance? Yes No

If Yes, provide details: _____

It is understood and agreed that if knowledge of any such facts, circumstances or situations exists, whether or not disclosed, any claim or action subsequently arising or developing therefrom shall be excluded from coverage under any policy issued by Trisura Guarantee Insurance Company.

PRIVACY DISCLOSURE AND CONSENT

The undersigned authorized officer of the Parent Corporation acknowledges that any personal information provided in connection with the insurance applied for, including but not limited to the information contained in this Application, has been collected in accordance with all applicable privacy legislation. The undersigned confirms that all necessary consents have been obtained for the collection, use, and disclosure of such information for the purposes of any investigation and inquiry in connection with this Application for insurance and, if applicable, investigating and settling claims, detecting and preventing fraud, and acting as required or authorized by law.

FALSE INFORMATION

Any person who, knowingly and with intent to defraud any insurance company or other person, files an Application for insurance containing any false information, or conceals information concerning any fact material thereto for the purpose of misleading any insurance company or other person, commits a fraudulent insurance act which is a crime.

DECLARATIONS AND SIGNATURE

The undersigned authorized officer of the Parent Corporation:

- (i) declares, after inquiry, that the statements and representations set forth in this Application, and all materials submitted to or requested by the Insurer in conjunction with this Application, are true;
- (ii) acknowledges that these statements, representations, and materials are relied on by the Insurer and that they shall be deemed material to the acceptance of the risk assumed by the Insurer under the insurance applied for, should the insurance be effected; and
- (iii) agrees that if the information supplied in connection with this Application changes between the date of this Application and the effective date of any insurance effected pursuant to this Application, the undersigned will immediately notify the Insurer of such changes, and the Insurer may withdraw or modify any outstanding indications, quotations and/or authorization or agreement to effect the insurance.

Signing of this Application does not obligate the Parent Corporation or the Insurer to effect the insurance, but it is agreed that all materials submitted to or requested by the Insurer in conjunction with this Application are hereby incorporated by reference into this Application and made a part hereof. Terms and conditions, including limits of coverage, offered by the Insurer may differ from those applied for by the Parent Corporation. It is further agreed that this Application and all materials submitted to or requested by the Insurer in conjunction with this Application are the basis of and are deemed attached to and incorporated into any policy effected pursuant to this Application.

PLEASE NOTE: Coverage cannot be bound unless this Application has been fully completed & duly signed & dated.

Parent Corporation	Date
Signature of duly authorized signing Officer	Title



MANAGEMENT LIABILITY PREMIUM CALCULATION

Coverage is **not** in effect until:

1. We receive the fully completed, signed and dated Application; AND
2. The Application has been reviewed and accepted by underwriters; AND
3. We receive the full premium payment.

Cash + Annual Revenues	\$1,000,000	\$2,000,000	\$3,000,000	\$5,000,000
\$0 - \$25,000	\$150	\$300	\$400	\$500
\$25,001 - \$100,000	\$350	\$450	\$550	\$700
\$100,001 - \$500,000	\$500	\$650	\$775	\$900
\$500,001 - \$1,000,000	\$575	\$750	\$925	\$1,250
Over \$1,000,000	Refer	Refer	Refer	Refer

Limit Requested: \$1,000,000 \$2,000,000 \$3,000,000 \$5,000,000

Total Payable: \$_____ (NOTE: You must add PST where applicable)



Management Liability (D&O) Frequently Asked Questions



- Q1 I have been told that liability insurance for clubs covers directors. Why then is Director's & Officer's coverage discussed so much and sold separately? What is this all about?
- A1 Commercial General Liability policies respond to law suits which result from a bodily injury or a property damage in which it is felt the club bears some responsibility. Your policy covers this and also covers directors and others associated with hosting club activities for these types of claims. However there are other things for which a director or officer may be sued which have nothing to do with a bodily injury or a property damage. Typically these law suits are the result of a wrongful act by a director and are filed by another director, club member or a financial institution. Director's and Officer's Liability coverage deals with these situations.
- Q2 What is a wrongful act?
- A2 It is an actual or alleged negligent act, error, omission, misstatement, misleading statement, neglect or breach of duty by the Directors and Officers, individually or collectively, in the discharge of their legal duties solely in their capacity as Directors and Officers of the society.
- Q3 Why buy D&O Liability insurance?
- A3 The purpose of a D&O liability insurance policy is to provide coverage for damages, judgments, costs and defense of legal actions, claims or proceedings. The coverage provides the following protection:
1. Protection of personal assets, as well as spouse's,
 2. Defense regardless of whether or not allegations are true
 3. Resources for defending the claim
 4. Reduction in reliance on the society:
- Bylaws contain indemnification provisions to protect the Directors & Officers. Despite these provisions, circumstances could exist where indemnification may not occur (the society is financially impaired, becomes insolvent or is not capable of providing funds for defense or resulting damages).
- Q4 What are my legal responsibilities under the law?
- A4 Under the law, Directors & Officers must (1) act in good faith and in the best interest of the society (2) act with a duty of care as a reasonably prudent person (3) perform duties in accordance with applicable statutes and your own charter.
- Q5 Under what statutes can a director or officer be liable under?
- A5 The following are Federal and Provincial Statutes a Director or Officer can be liable under:
1. Income Tax Act
 2. Employment Standards Act
 3. Bankruptcy Act
 4. Pension Benefits Act
 5. Competitions Act
 6. Unemployment Insurance Act
 7. Discrimination Act
 8. and more
- Q6 What are some examples of claims?
- A6
1. Negligence of account procedures and mishandling of funds;
 2. Personal benefit by a Director;
 3. Jeopardizing tax-exempt status;
 4. Interest that should have been collected and distributed;
 5. Failure to adopt and implement appropriate safety and operational procedures at a facility causing the facility to be shut down by regulators.
- Q7 Our club is interested in Directors & Officers Liability insurance to protect our directors. This coverage is an option on the insurance program and we are wondering about the need and the expense.
- A7 The protection provided to directors under most Society Acts has weakened over the past few years as cases are tested in the courts. We are able to arrange Director's & Officer's liability insurance for your club. Often directors are reluctant to vote for the expense of buying this coverage for the board because they feel it may be considered somewhat selfish. The members of a club on the other hand should support this purchase and protect the people who freely offer their time to the running of club affairs.