



Worldwide Outfitter and Guides Association Incorporated
P.O. Box 469 Sandy, UT 84091-0469
Phone: 800-321-1493 Fax: 800-666-9011
E-Mail: woga@insureguides.com
Web Site: www.insureguides.com

SCHEDULE OF MONTHLY EVENTS

Date Report Completed: _____

Events for the Month of: _____

Insured Name: _____

Master Coverage Contract #: _____ Certificate #: _____

Note: Only those events which are reported monthly will be provided coverage. Report must be in the Insurer's office by the 10th of the month following the month in which the events listed below occurred. For example, events that occurred during October need to be reported to the ISERA by November 10. Only events for equipment covered under your coverage contract need to be listed. Add additional sheets as necessary.

Event: _____

Location: _____ Phone Number: _____

List of Activities: _____

Date of Event: _____ # of Participants: _____

Event: _____

Location: _____ Phone Number: _____

List of Activities: _____

Date of Event: _____ # of Participants: _____

Event: _____

Location: _____ Phone Number: _____

List of Activities: _____

Date of Event: _____ # of Participants: _____

Event: _____

Location: _____ Phone Number: _____

List of Activities: _____

Date of Event: _____ # of Participants: _____

Date: _____ # of Participants: _____

Event: _____

Location: _____ Phone Number: _____

List of Activities: _____

Date of Event: _____ # of Participants: _____

Print Name: _____ Daytime Phone: _____

Signature: _____ Date: _____