



**APPLICATION FOR LAWYERS PROFESSIONAL LIABILITY INSURANCE  
SUPPLEMENTAL APPLICATION**

**ENTERTAINMENT**

Name of Applicant (The Firm): \_\_\_\_\_

1. List all entertainment (e.g., athletes, performers, publishers, authors, designers, etc. and public figures) clients of the firm (attach supplemental sheet if necessary) during the past 5 years:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

- 2. Does the firm, or any attorney for whom coverage is sought, negotiate personal appearances or product endorsements for the applicant's clients?  YES  NO
- 3. Does the firm, or any attorney for whom coverage is sought, negotiate the financing or distribution of productions?  YES  NO
- 4. Has any attorney, for whom coverage is sought, ever served as the trustee of an entertainment client's trust?  YES  NO
- 5. Does the firm, or any attorney for whom coverage is sought, have a business relationship with any of the applicant's entertainment clients other than the providing of legal services?  YES  NO
- 6. Does the firm, or any attorney for whom coverage is sought, provide investment advice to any of the applicant's entertainment clients?  YES  NO
- 7. Does the firm, or any attorney for whom coverage is sought, make investments for any of the entertainment clients?  YES  NO
- 8. Does the firm, any related or controlled entity, or any attorney for whom coverage is sought, serve as a talent agent or manager?  YES  NO
- 9. Does any attorney, for whom coverage is sought, have the authority to write checks for any of the applicant's entertainment clients?  YES  NO

- 10. Does the firm, or any attorney for whom coverage is sought, ever accept percentages of deals as compensation for legal services?  YES  NO
- 11. Does the firm, or any attorney for whom coverage is sought, ever accept compensation in kind (e.g. copyrights) in return for legal services?  YES  NO
- 12. Does the applicant have a written procedure in their office for handling conflicts of interest in The entertainment field?  YES  NO  
*(If "No" please explain on a separate sheet of paper and attache to this supplemental application)*
- 13. In you answered "Yes" to any of questions 5 – 12 in this supplemental application, please describe The services you perform for the entertainment clients.

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SIGNATURE OF OFFICER OR PARTNER OF FIRM                      PRINT NAME OF OFFICER OR PARTNER                      DATE

**Application must be signed by duly authorized proprietor, partner, member or officer of the firm.**