2026 Certificate of Liability Insurance & Additional Insured Endorsement Requirements

Unified Wine & Grape Symposium
January 27 - 29, 2026 (Regional Wine Tasting: January 28)
Policy Coverage Dates: January 28, 2026
SAFE Credit Union Convention Center, Sacramento, California, USA

Each Regional Wine Tasting association participant is required to provide a Certificate of Insurance with evidence of Host Liquor Insurance and a CG 2026 Additional Insured Endorsement. Meeting these insurance requirements is as noted in the Acceptance Form.

You may choose one option below:

1 Current Commercial General Liability Insurance Policy

To utilize your current Commercial General Liability (CGL) insurance policy, we suggest contacting your insurance agent to obtain a quote for a certificate of liability insurance with Host Liquor Liability and CG 2026 endorsement. **We will only accept a CG 2026 for your endorsement**. **Click here** for sample below. Your insurance shall be primary and non-contributory to any insurance held by California Association of Winegrape Growers (CAWG.) Insurance held by CAWG shall be excess over your insurance.

2 Single Event Liability Policy

If your insurance provider is unable to issue a CG 2026 for your current Commercial General Liability (CGL) insurance policy, you must purchase a Single Event Liability Policy that will provide you with a certificate of insurance with Host Liquor Liability and CG 2026 endorsement for this event.

Please submit your Certificate of Liability Insurance with Additional Insured Endorsement CG 2026 by December 15, 2025 to:

Unified Wine & Grape Symposium, LLC
Phone: (530) 753-3142 • Fax: (530) 601-5317
Email: insurance@unifiedsymposium.org

2026 Liability Insurance Certificate & Additional Insured Endorsement Requirements

Certificate of Liability Insurance Sample

Please submit your Certificate of Liability Insurance with your Additional Insured Endorsement Form issued for your current Commercial General Liability (CGL) policy. All sections must be completed as done in the example and in English.

Please submit your certificate of liability insurance with the following requirements:

1. Minimum insurance limits in US Dollars as listed.
2. Insurance Company must be located and licensed to do business in the USA.
3. The Insured Name on the certificate must be identical to the Legal Entity name listed on the Regional Wine Tasting Acceptance Form.
4. Add "Host Liquor Liability" in the General Liability section.
5. Occur box must be selected for Type of Insurance.
6. Additional Insured box must be selected.
7. Policy number.
8. Policy period must cover the dates of the Regional Wine Tasting (January 28, 2026).
9. Name event, date and endorsement form #.
10. Additional insured endorsement (Form CG 2026) must be attached to the certificate (see next page).

These requirements are per terms for your participation.

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Insurance Agent Name/Address	CONTACT NAME: PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS:
	INSURER(S) AFFORDING COVERAGE — NAIC #
	INSURER A : Insurance Company Name (2)
INSURED (AS NAMED IN POLICY) Insured Name/Address (3)	INSURER B :
	INSURER C :
	INSURER D :
	INSURER E :
	INSURER F :

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	GENERAL LIABILITY (5) X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR X Host Liquor Liability (4) GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO-JECT LOC	X (6)		(Policy Number Mandatory) (7)	(Policy term must cover event dates) Current Policy Period (8)		EACH OCCURRENCE	$1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	$50,000
							MED EXP (Any one person)	$1,000
							PERSONAL & ADV INJURY	$1,000,000
							GENERAL AGGREGATE	$2,000,000
							PRODUCTS - COMP/OP AGG	$1,000,000
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS / SCHEDULED AUTOS HIRED AUTOS / NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident)	$
							BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB / OCCUR EXCESS LIAB / CLAIMS-MADE DED RETENTION $						EACH OCCURRENCE	$
							AGGREGATE	$
								$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) N / A If yes, describe under DESCRIPTION OF OPERATIONS below						WC STATU-TORY LIMITS / OTH-ER	
							E.L. EACH ACCIDENT	$
							E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$

(1)

SAMPLE
SEND TO YOUR INSURANCE COMPANY

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Event at SAFE Credit Union Convention Center on January 28, 2026. Unified Wine & Grape Symposium, LLC and the California Association of Winegrape Growers (CAWG) are hereby named as additional insureds per CG 2026 endorsement attached. This insurance shall be primary and non-contributory. (9)

CERTIFICATE HOLDER	CANCELLATION
California Association of Winegrape Growers 1121 L Street, Suite 304 Sacramento, CA 95814	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE

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Submit Certificate with Endorsement by December 15, 2025 to:

Unified Wine & Grape Symposium, LLC
Phone: 530-753-3142 • Fax: 530-601-5317
Email: insurance@unifiedsymposium.org

10 See next page for Form CG 2026 sample

Additional Insured Endorsement CG 2026 Sample

Please submit your Additional Insured Endorsement Form with your Certificate of Liability Insurance issued for your current CGL policy. All sections must be completed as shown in

Your Additional Insured Endorsement Form CG 2026 must list the following:

1. Unified Wine & Grape Symposium, LLC
2. California Association of Winegrape Growers (CAWG)
3. Policy number

These requirements are per terms for your participation.

The event will be held at SAFE Credit Union Convention Center, 1400 J Street, Sacramento, CA 95814

POLICY NUMBER: (Policy Number Mandatory)

COMMERCIAL GENERAL LIABILITY
CG 20 26 04 13

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):
Unified Wine & Grape Symposium, LLC; **California Association of Winegrape Growers (CAWG)**
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

SAMPLE
SEND TO YOUR INSURANCE COMPANY

A. Section II - Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III - Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

Note: Your insurance carrier must be located in and licensed to do business in the U.S.A

Submit Endorsement with Certificate by December 15, 2025 to:

Unified Wine & Grape Symposium, LLC
Phone: 530-753-3142 • Fax: 530-601-5317
Email: insurance@unifiedsymposium.org