

**2027 CERTIFICATE OF LIABILITY INSURANCE &
ADDITIONAL INSURED ENDORSEMENT REQUIREMENTS**

Unified Wine & Grape Symposium

January 26 - 28, 2027 (Regional Wine Tasting: January 27)

Policy Coverage Dates: January 27, 2027

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:

Current Commercial General Liability Insurance Policy

- 1** 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. (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 18, 2026 to:**

Unified Wine & Grape Symposium, LLC

Phone: (530) 753-3142 • Fax: (530) 601-5317

Email: insurance@unifiedsymposium.org

2027 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 27, 2027).
- 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.

ACORD®				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: _____			
INSURED (AS NAMED IN POLICY) Insured Name/Address				INSURER(S) AFFORDING COVERAGE INSURER A: Insurance Company Name 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	ADDITIONAL INSURED	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	GENERAL LIABILITY		(Policy Number Mandatory)	(Policy term must cover event dates)	Current Policy Period		
	☒ COMMERCIAL GENERAL LIABILITY	☒ CLAIMS-MADE ☒ OCCUR				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 - COMPIOP AGG \$1,000,000	
	☒ Host Liquor Liability						
GEN'L AGGREGATE LIMIT APPLIES PER: ☐ POLICY ☐ PROJECT ☐ LOC							
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$	
	ANY AUTO						
	ALL OWNED AUTOS						
	HIRED AUTOS						
	UMBRELLA LIAB					EACH OCCURRENCE \$ AGGREGATE \$	
	EXCESS LIAB						
	DED	RETENTION \$					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					WC STATUTORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICEMEMBER EXCLUDED? (Mandatory in NH)						
	If yes, describe under DESCRIPTION OF OPERATIONS below						
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 27, 2027. 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.							
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			
ACORD 25 (2010/05)				© 1988-2010 ACORD CORPORATION. All rights reserved.			
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Submit Certificate with Endorsement by December 18, 2026 to:

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

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 18, 2026 to:

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