

GO TO www.wedsure.com. MAKE SURE IT SAYS \$1 MILLION / \$2 MILLION AND CONTINUE

WEDSURE®
The Original Wedding Insurance

TOP-RATED WEDDING INSURANCE

WHY CHOOSE WEDSURE?

BLOG

WE ARE HERE FOR YOU

QUOTE NOW

★★★★★
Forbes Advisor names Wedsure
#1 in Wedding Insurance 2022!
The only 5 Star-Rated
wedding insurance

You Can Trust
Liability Insurance up to \$5 Million.
Free Host Liquor Liability. Instant
Certificate of Insurance.

Wedsure Liability
Select Limit for Instant Quote
\$1 Million / \$2 Million
(Includes Host Liquor Liability & COI)
\$125.00
Continue
Buy Online Instantly

SELECT EVENT TYPE AND CONTINUE

Get an Instant Quote

YOUR PRICE **\$125.00**

Event Type
Select Event Type
✓ Wedding (Rehearsal, Rehearsal Dinner, Ceremony, Reception)
Anniversary Party
Baby Shower
Baptism
Bar Mitzvah
Bat Mitzvah
Bridal Shower
Christening
Communion
Confirmation
Engagement Party
Funeral Service, Family
Gender Reveal Party
House Warming
Memorial Service
Private Family Party
Wedding Shower
Other

Coverage Limits
000,000/\$2,000,000
Edit
Add
Add
Add
Add
Add
Add
Add
Add

CREATE AN ACCOUNT WITH YOUR INFORMATION

Sign In

New to Wedsure? Sign up now.

Are you a broker? ☐ Yes ☒ No

Are you a concessionaire, vendor, exhibitor, or facility? (Ex: Photographer, DJ, Event Planner, Facility, etc.)

☐ Yes ☒ No

First Name

Bride

Last Name

Bride

Email

whitney.hewitt@gmail.com

Password

Minimum 8 characters

Retype Password

Contact Phone (optional)

XXX-XXX-XXXX

How did you hear about us?

Please Select



☐ Yes, please add me to your mailing list to receive informational emails. R.V. Nuccio & Associates does not share your e-mail address or personal information with third parties.

OK, Create my account

FILL OUT THE APPLICANT INFORMATION



Applicant Information

Named Insured ?

First Name

Bride

MI (Optional)

Last Name

Bride

Address

your address here

Tahlequah

OK



74464

Contact Phone

9187773333

Relationship to Honoree

Self



Does the applicant own, manage, operate, or rent on a full-time basis the location where the event(s) are taking place?

☐ Yes ☒ No

Quote \$125.00

Coverages

[Edit Coverage](#)

Coverage Limit

Liability	\$1,000,000/\$2,000,000
Medical Payments	Not Covered
Cancellation/Postponement	\$1,000.00
Additional Expense Limit	\$250.00
Change of Heart	Not Covered
Gifts	Not Covered
Jewelry	Not Covered
Loss of Deposits	Not Covered
Photographs & Video	Not Covered
Professional Counseling	Not Covered
Rented Party Supplies	Not Covered
Special Attire	Not Covered

Questions?

Call 800.364.2433

Monday - Friday 8:30AM to 5:00PM PT

[Email us](#)

FILL OUT THE HONOREE INFORMATION

Honoree Information

Honoree 1 (Ex: Bride or Groom) [?](#)

First Name

Bride

MI (Optional)

Last Name

Bride

Address [Copy Applicant Address](#)

your address here

Tahlequah

OK



74464

Honoree 2 (Ex: Bride or Groom) [?](#)

First Name

Groom

MI (Optional)

Last Name

Groom

Address [Copy Applicant Address](#)

your address here

Tahlequah

OK



74464

Continue ▶

Put in event types. **YOU MUST CLICK YES TO ADD THE LEGACY AS A CERTIFICATE HOLDER. PLEASE ALSO ADD THELEGACYOK@GMAIL.COM TO GET A COPY**

Event Type & Event Information

Event Type [?](#)

Wedding (Rehearsal, Rehearsal Dinner, Ceremony)

Event Attendance [?](#)

150

Reception Information

Date of Reception

12/10/2022 

Is the Reception being held on a cruise ship?

☐ Yes ☒ No

Event Location [?](#)

Event Site Name

The Legacy at MK Ranch

United States 

19495 E Balentine Rd

Tahlequah

OK 

74464

Certificate Holder Information [?](#)

Does this event location require that you name them on a liability policy as an Additional Insured/Certificate Holder?

☒ Yes ☐ No

Name of Certificate Holder

The Legacy at MK Ranch

United States 

Address

19495 E Balentine Rd

Tahlequah

OK 

74464

Enter additional insured language, if any.
(Optional)

Email a copy of Certificate to: (Optional) [?](#)

thelegacyok@gmail.com

Cancel

Remove Event

Save Event

Continue 



The image shows a sample Certificate of Liability Insurance form. It includes fields for the policy number, date, and the insured's name. There is a table for listing additional insureds with columns for name, address, and phone number. The form also contains sections for the insured's signature and the insurer's signature, along with a notary section.

HIT CONTINUE

Client ID: 1975676

You are logged in as whitney.hewitt@gmail.com | [My Account](#)

Coverages

Applicant Information

Event Information

Insurance Certificates

Review

Purchase & Print

Additional Insured

You have entered the following Additional Insureds:

Certificate Holder Name	Additional Insured language
<div>Edit</div> The Legacy at MK Ranch	

Add New Additional Insured

Continue ▶

CONFIRM YOU HAVE A \$1M/\$2M POLICY

Review Final Quote

Private Event Insurance Quote

[Print Quote](#)[Email Quote Letter](#)

Underwritten by Fireman's Fund Insurance Company

Date: 12/08/2022

Questions?

Call 800.364.2433

Monday - Friday 8:30AM to 5:00PM PT

[Email us](#)

Applicant Name	Event Type	Proposed Coverage Dates ?
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Bride Bride	Wedding (Rehearsal, Rehearsal Dinner, Ceremony, Reception)	From 12:01AM on 12/09/2022 to 12:01AM 12/12/2022
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Coverage Options	Limit/Deductible
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Liability & Property Damage	\$1,000,000/\$2,000,000 Occ/Agg - Deductible \$1,000 Host Liquor Liability Included
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Medical Payments to Others	Not Covered
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Cancellation / Postponement	\$1,000.00 - Deductible \$25
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Additional Expense Limit	\$250.00 - Deductible \$25
--------------------------	----------------------------

Change of Heart	Not Covered
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Photographs and Video	Not Covered
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Gifts	Not Covered
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Special Attire	Not Covered
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Jewelry	Not Covered
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Loss of Deposits	Not Covered
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Professional Counseling	Not Covered
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Rented Property	Not Covered
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Subtotal	\$95.00
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RVNA, Inc.	\$30.00
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Corporate Charge	
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TOTAL	\$125.00
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For any questions, please contact R.V. Nuccio & Associates, Inc. at 1-800-364-2433 or visit [Wedsure.com](#).

ACKNOWLEDGE AND SIGN

Acknowledgements & Signature

Do you understand and agree that you, the named insured/applicant, are not a concessionaire, vendor, exhibitor, or facility (ex: photographer, DJ, event planner, caterer, facility)?

☒ Yes ☐ No

Do you understand and agree that any loss or claim caused directly or indirectly by, in consequence of, contributed to, aggravated by, or resulting in any way from the SARS-COV-2/COVID-19/Corona Virus or any derivation, mutation or variant thereof, now or at any time into the near or far future, is NOT covered by this policy and is considered a Known Circumstance which is excluded by this policy?

☒ Yes ☐ No

Do you understand and agree that any loss or claim caused by or resulting from military deployment, change in orders, or cancellation of leave of absence is considered a known circumstance and is therefore not covered by this policy?

☒ Yes ☐ No

Do you understand and agree that by signing this application, R.V. Nuccio & Associates, Inc. is hereby appointed and designated as your Broker Of Record regarding the placement of this insurance policy?

☒ Yes ☐ No

Is the Applicant, Honoree 1 or Honoree 2 aware of any circumstances, conditions or claims, other than or in addition to the Corona Virus/Covid 19 pandemic, which may result in a loss under this insurance?

☐ Yes ☒ No

Signature

I understand and agree that the policy will not provide any coverage for Bodily Injury, Property Damage, Personal Injury, or Medical Payments if the Private Event Type or any other application information is falsely reported, falsely stated, incorrectly selected, incorrectly stated, misreported, misrepresented, misstated, or wrongly stated at the time of application. I understand and agree that by entering my name below, I am effectively signing this application for insurance.

☒ Yes, I agree ☐ No, I disagree

Enter Name and Date

BRIDE

BRIDE

12/8/2022

By purchasing this insurance, you are agreeing to the terms & conditions displayed within the Final Quote Letter above and are electronically signing this agreement.

Complete

FILL OUT PURCHASING INFORMATION

Client ID: 1975676

You are logged in as whitney.hewitt@gmail.com | [My Account](#)


Coverages

Applicant Information

Event Information

Insurance Certificates

Review

Purchase & Print

Purchase

Enter Billing Information

Cardholder Information

First Name

Last Name

Company Name (optional)

Billing Address

Copy Applicant Address

Street Address

City

Select State✓

Zip / Postal Code

Credit Card Number

Please select card type

Credit Card Number


Ex. XXXXXXXXXXXXXXXXXXXX

Expiration Date

CSC

Month

Year

 Enter Code

The total cost is: \$125.00

Purchase Online Now

Questions?
Call 800.364.2433
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Email us