



## **VENDOR LIABILITY INSURANCE**

- All Vendors **must** be covered by Event Liability Insurance
- Minimum Standard Coverage of \$1,000,000.00
- Pulmonary Hypertension Association is to be listed as additional insured.

**8<sup>th</sup> Annual RACE 2 CURE PH – Taylor Caffrey Memorial 5K Run/Walk**  
Taylor's Wish – c/o Cali Kimble  
P.O. Box 28593  
Anaheim, CA 92809-9998

**The Pulmonary Hypertension Association**  
801 Roeder Road, Suite 1000  
Silver Springs, MD 20910

***Note:** If you have any further questions, below is our contact information.*

Email: [cali4taylorswish@yahoo.com](mailto:cali4taylorswish@yahoo.com)

Website: [www.TaylorsWish.org](http://www.TaylorsWish.org)