

Capitol Indemnity Corporation
Capitol Specialty Insurance Corporation
Platte River Insurance Company

## CLUBS QUESTIONNAIRE (CIVIC, SOCIAL, SERVICE, NON-PROFIT ORGANIZATIONS)

Please answer all questions. Submit this questionnaire with a completed ACORD application prior carrier loss runs.					
Named Insured:					
Website:					
PROHIBITED CIRCUMSTANCES					
If any of the questions in this section are answered "YES", you are not eligible for coverage.					
1.	☐ Yes	☐ No			
	Dating/Encounter Club Labor Union Gentlemen's G	Club			
	School Fraternity/Sorority Aircraft Club ATV Club				
	Snowmobile Club Trade Association Motorcycle Cl	ub			
	Auto Club** Gun Club** Clubs involvin	ıg animals**			
	Ski Club**				
	**Can be considered for coverage in CSIC. Participants and riders must be excluded using CGL 285 and CGL 325.				
2.	2. Is the applicant a lobbying or advocacy group that involves controversial iss	sues, marches	☐ No		
or demonstrations (Right to life, animal rights, etc.)?					
GENERAL INFORMATION					
1.	1. Does the applicant provide any legal, health/medical, governmental type so	ocial work,  Yes	☐ No		
	counseling, environmental services or financial advice?				
2.	2. Is the applicant involved in any type of community cleanup or fix up projects?		☐ No		
3.	Does the applicant work with minors?		☐ No		
4.	Does the applicant have 50 or more volunteers?		☐ No		
5.	Does the applicant offer any inflatable amusement devices?		☐ No		
6.	Does the applicant offer any mechanical amusement devices?		☐ No		
7.	7. Does the applicant serve alcoholic beverages?	☐ Yes	☐ No		
8.	. Are alcoholic beverages provided without a charge?		☐ No		
	a. Does the club have special events that serve alcohol free of charge?		☐ No		
	b. Is the age of all patrons consuming alcohol verified?	☐ Yes	☐ No		
	c. Are all servers required to take alcohol server training (TIPS, etc.)?	☐Yes	□No		



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OTHER INFORMATION				
1.	. What is the area of the club house?			
2.	. Number of members?			
3.	. Number of lakes, ponds, rivers and/or similar water exposures?			
4.	. Area of any rental halls?			
5.	. Number of boats or canoes not available for rent?			
6.	. Sales from rental of boats?			
7.	. Number of boat docks/piers?			
	If there are any food sales, please complete the Restaurant Questionnaire - CGE 119.			
	If there are any liquor sales, please complete the Liquor Questionnaire - CGE 115.			
	If there are events open to the public, please complete the Special Events Questionnaire -	CGE 121.		
IMPORTANT NOTICE				
I DECLARE THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE TO THE BEST OF MY KNOWLEDGE AFTER REASONABLE INQUIRY.				
Any person who knowingly and with intent to defraud any insurance company or another person submits an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information containing any material fact thereto, commits a fraudulent act that is subject to criminal and substantial civil penalties. I agree that any intentional concealment or misrepresentation of a material fact concerning this insurance or the subject thereof may void any policy issued.				
ĊО	(As part of our underwriting procedures, a routine inquiry may be made to obtain applicable information concerning character, general reputation, and credit history. Upon your written request, additional information as to the nature and scope of the report, if one is made, will be provided.)			
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Pro	roducer Signature Date	<del></del> е		