

Proposed First Named Insured & Other Named Insured(s):

Location Address	Street	City	County	State	ZIP Code
------------------	--------	------	--------	-------	----------

BUSINESS INFORMATION

- Number of years' experience:
If new venture, provide prior experience:
- Describe all business operations conducted:
- Do you sponsor any sporting teams or events? ☐ Yes ☐ No
If yes, provide details:
- Currently or in the past have you had any warnings, suspensions, revocation or other restrictions due to failure to comply with safety codes or licensing standards? ☐ Yes ☐ No
If yes, provide details:

UNDERWRITING INFORMATION

- Type of Instruction (Check all that apply):

<input type="checkbox"/> Aerobics	<input type="checkbox"/> Karate/Judo	<input type="checkbox"/> Surfing
<input type="checkbox"/> Baseball/Softball	<input type="checkbox"/> Paddle Boarding	<input type="checkbox"/> Swimming (excl. diving)
<input type="checkbox"/> Basketball	<input type="checkbox"/> Personal Trainers (general fitness only)	<input type="checkbox"/> Swimming (incl. diving)
<input type="checkbox"/> Boating	<input type="checkbox"/> Racquetball	<input type="checkbox"/> Tennis
<input type="checkbox"/> Boxing	<input type="checkbox"/> Rugby	<input type="checkbox"/> Track (no high jump/pole vaulting)
<input type="checkbox"/> Football	<input type="checkbox"/> Scuba Diving	<input type="checkbox"/> Water Skiing
<input type="checkbox"/> Golf	<input type="checkbox"/> Skating (ice)	<input type="checkbox"/> Wind Surfing
<input type="checkbox"/> Gymnastics	<input type="checkbox"/> Skating (roller)	<input type="checkbox"/> Wrestling
<input type="checkbox"/> High Jump/Pole Vaulting	<input type="checkbox"/> Skiing/Snowboarding	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Hockey	<input type="checkbox"/> Soccer	
- Are all instructors over the age of 18? ☐ Yes ☐ No
If no, provide details:
- Instructor to student ratio: # Instructors: # Students:
- Average age of participants:
- Do you conduct operations outside of the United States? ☐ Yes ☐ No
- Will any of the instruction take place off-site? ☐ Yes ☐ No
If yes, provide details:
- List type of equipment used in training (i.e. trampoline, climbing wall, etc.):
- Is instruction/coaching of professional athletes offered? ☐ Yes ☐ No
If yes, provide details:
- | | | |
|---|--------------------------|--------------------------|
| | Yes | No |
| 9. Do you use Independent Contractors? | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Do you obtain Certificates of Insurance? | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are contracts in place? | <input type="checkbox"/> | <input type="checkbox"/> |

	Yes	No
10. Do you have a formal safety program?	<input type="checkbox"/>	<input type="checkbox"/>
a. If yes, provide details: _____		
b. Is a signed release/waiver of liability required prior to participating in sports training?	<input type="checkbox"/>	<input type="checkbox"/>
11. Are all instructors trained in CPR?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, provide details: _____		
12. Provide details regarding training of instructors/certifications: _____		

	Yes	No
13. Are the following checked on Employees and Volunteers:		
a. Personal references	<input type="checkbox"/>	<input type="checkbox"/>
b. Previous employers	<input type="checkbox"/>	<input type="checkbox"/>
c. Criminal background	<input type="checkbox"/>	<input type="checkbox"/>
14. Are records kept of all items checked (references, background checks, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>

IMPORTANT NOTICE
DECLARATION

I DECLARE THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE.

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.

SIGNATURES

Applicant Signature	Title	Date
Producer Signature	Date	
Producer Name and Address		