

MAIN SALES INSURANCE SOLUTIONS INC

CLUBS

GENERAL LIABILITY SUPPLEMENTAL

Applicant's Name: _____

Type Of Club – Social___ Fraternal___ Civic___ Service___

Please note: Country, golf, tennis, home-owner associations, racquet ball, hunting, exercise and health or swim clubs are not eligible under this program. Please refer to appropriate program and supplemental application.

1. Please provide narrative addressing the clubs reason for being: (ie. Do they have a mission statement or a defined purpose?) _____

2. Confirm no exposure exists to the following type of prohibited clubs:

- | | |
|----------------------------------|-----------------------------|
| _____ Bicycle clubs | _____ Car / Motorcycle |
| _____ Fraternities or sororities | _____ Sailing / Yacht clubs |
| _____ Counseling clubs | _____ Scuba |
| _____ Horse riding | _____ Ski diving |
| _____ Snow ski | _____ Water ski |

3. # Of Members _____ (One family counts as one member)

4. Annual Receipts \$ _____

5. Does your club engage in or sponsor off premises Special Events? - Yes No
(If "Yes" please fill out one of our Special Event Supplemental Application)

6. Is the club planning on expanding into any other activities during this coming year? Yes No
If "yes", please describe? _____

7. Does the club participate in outdoor activities? If so, please describe: _____

8. Swimming Pools? Yes No

- Confirm outside pools are fenced with self-latching gates Yes No
- Confirm rules, hours and depth markers posted Yes No
- Confirm life safety equipment is available Yes No
- Confirm no slides or diving board Yes No
- Confirm no diving teams, competition or instruction: Yes No

Lake or Beach? Yes No If yes, provide acres of each _____

How many total acres of land does the club own? _____

I hereby certify that all information is accurate to the best of my knowledge.

Applicant Signature: _____ Date _____

Producer Signature: _____ Date: _____