

MAIN SALES INSURANCE SOLUTIONS, INC.
Martial Arts Studio Supplemental Application

1. Type of School: Amateur Professional Semi-professional

Type of Martial Arts taught: _____

Annual gross receipts from all operations (include tuition fees, food receipts, clothing and equipment sales, etc.): \$_____
2. Describe other operations on premises (weight room, exercise equipment, boxing ring, heavy bags, tanning bed, pool, showers, locker room, climbing wall, etc.)_____
4. Describe protective equipment (mats, pads, gloves, headgear, etc.), used: _____
5. Are students or their parents required to sign liability waivers? Yes No if yes, please attach a copy of the waiver.
6. Describe any tournaments you sponsor. (A tournament for this purpose is an event Sponsored by you, open to the public, where the participants are members of the club or school competing with members from another club or school.) _____
- 6a. Are participants required to sign waivers? _____
7. Describe any exhibitions you sponsor. (An exhibition for this purpose is an event sponsored By you, open to the public, where the participants are limited to members of the school or club.) _____
8. Describe any additional off-site activities: _____
9. Any use of weapons? _____ If so, what type? _____
10. Total number of students enrolled: _____

Students' ages range from _____ to _____
11. Are you involved with any Ultimate Fighting Championships? Yes No

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

Applicant Signature: _____ Date: _____

Producer: _____ Date: _____