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CLUB PROGRAM SUPPLEMENTAL APPLICATION
(COMPLETE IN ADDITION TO ACORD GENERAL LIABILITY APPLICATION)

Name of Agent: _____

Applicant's Name: _____

Web site Address: _____

1. Type of Club or Organization:

- a. Civic Service Social
- b. For Profit Not For Profit
- c. Buildings or premises owned or leased
 No buildings or premises owned or leased except for office purposes
- d. Athletic or sports Country or golf Polo
 ATV, motorcycle or snowmobile Dating/encounter Racquet sports and handball
 Automobile Equestrian Riding Snow or water sports
 Beach club Financial/investing Social Services – Consulting
 Business or professional Gentlemen's club Swimming
 Camping Hunting—hunt/skeet/trap
 Collegiate fraternities or sororities Non-collegiate fraternity
 Other—Describe: _____

2. Describe Purpose/Goals of your Organization: _____

3. _____ Number of Members
_____ Square footage you occupy in buildings owned or leased by you
_____ Square footage you lease to others in buildings owned by you

4. Annual Sources of Revenue:

\$ _____ Membership Fees or Dues	\$ _____ Donations
\$ _____ Restaurant/Food Sales	\$ _____ Catering Operations
\$ _____ Liquor Sales	\$ _____ Hall Rental
\$ _____ Rental income from property leased to others	
\$ _____ Activities/events on premises where the public is admitted for an admission charge	
\$ _____ Special Events off premises. Describe event: _____	
\$ _____ Other—Describe: _____	

5. Other operations:

- Swimming pools
 Number indoor: _____
 Number outdoor: _____
- In-ground Above-ground
- Diving boards/slides/diving plat-
 forms? Yes No
- Diving board/platform height: _____
- Slide height: _____
- Swimming rules posted? Yes No
- If an outdoor pool, is it fenced with
 a self-latching gate? Yes No
- Life-safety equipment available at
 pool side? Yes No
- Certified lifeguard available when
 swimming is allowed? Yes No

- Boats, motorboats, sailboats
 Number: _____
 Type: _____
- Bingo or "Casino" Nights—Public admitted
 Number of nights monthly: _____
 Average nightly attendance: _____
- Land Owned or Leased
 Number of acres: _____
- Playgrounds
 Number: _____
- Ski lifts/tows
- Waterfront Exposures
 Lake River Ocean/Gulf
 Lake formed by a dam (complete GLS-113)
 Lake—Number of acres: _____
 Is swimming allowed? Yes No

6. Do club activities involve sponsorship or operation of "camps" for children or the mentally/physically challenged? Yes No

7. Does applicant have any other business ventures for which coverage is not requested?..... Yes No
 If yes, explain and advise insurance carrier's name: _____

FRAUD WARNING:

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

FRAUD WARNING (APPLICABLE IN TENNESSEE AND WASHINGTON):

It is a crime to knowingly provide false, incomplete, or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines, and denial of insurance benefits.

FRAUD WARNING APPLICABLE IN THE STATE OF NEW YORK:

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

APPLICANT'S NAME AND TITLE: _____

APPLICANT'S SIGNATURE: _____ DATE: _____
 (Must be signed by an active owner, partner or executive officer)

PRODUCER'S SIGNATURE: _____ DATE: _____