



	CURRENT INFORMATION	CHANGES
Legal Business Name		
dba (doing business as)		
Type of Business	<input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Other:_____	<input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Other:_____
Mailing Address:		
Location Address: <i>If more than one location complete a separate application for each location.</i>		
Contact Name		
Phone		
Email		
Annual Gross Sales From:		
Membership Dues		
Initiation Fees		
Liquor		
Pro Shop		
Tanning		
Rental from Leased Space		
Other		
Total Annual Gross Sales		
Number of active members/ students/clients?		
How many years have you been in business?		
Have you made any significant changes to your club during the past year? <i>If yes, explain</i>		

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Do you perform criminal background checks on all employees and independent contractors?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you offer child care or kids programming, do you have written guidelines in place for preventing minors being left alone with adults?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do any of your employees have known convictions or allegations of sexual offenses?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Do you host any Special Events? Yes No

Describe _____

If yes, attach special event supplemental application. Available on our website. Please note that additional premium may apply. Special Events include holiday parties, fundraisers, tournaments and any other "games or events" that include participants other than your own members or are held off-site or require an entry fee.

Do you have separate coverage in place for your Special Event? Yes No

Describe _____

NOTE: We must receive our Special Event application and approve any Special Event for the General Liability policy to cover the event.

THIS POLICY DOES NOT COVER CLAIMS ARISING OUT OF THE RECOMMENDATION, SELLING, PROMOTION, MANUFACTURING, AND/OR TESTING OF VITAMINS, HERBS, NUTRITIONAL AND/OR DIET SUPPLEMENTS.

No application will be accepted unless signed by the applicant.

The applicant warrants that all answers to the questions on this application are true and correct. Any person who, knowingly and with intent to defraud any insurance company or other person, files an application for insurance containing false information, or conceals for the purpose of misleading information concerning fact thereto, commits a fraudulent insurance act, which is a crime.

Applicant Signature: _____ Date: _____