

H. Will bleachers or platforms be involved? yes no
If yes: portable permanent
back and side railings provided? yes no
construction: wood steel concrete
height: ft
age: yrs

I. Is liquor served or sold by the insured: If so, explain

J. Is liquor served or sold by others? If so, do they
have their own liquor liability coverage? _____

K. Will first aid facilities be provided by applicant? yes no
If yes, who will be in charge of facilities? doctors nurses
others-explain _____

L. If applicant is sponsor, does operator have liability insurance?
yes no Limits: Company

M. Have certificates of insurance been obtained from operator?
yes no

N. Does applicant agree to hold harmless any Third Party? yes no
Is applicant held harmless by others? yes no
(If answers to 1 or 2 is yes, attach copy of contracts)

PREVIOUS COVERAGE:

YEAR	COMPANY	POL #	LIMITS	PREMIUM
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----

THIS APPLICATION DOES NOT BIND THE APPLICANT NOR THE COMPANY TO COMPLETE THE INSURANCE, BUT IT IS AGREED THAT THE INFORMATION CONTAINED HEREIN SHALL BE THE BASIS OF THE CONTRACT SHOULD A POLICY BE ISSUED.

APPLICANTS SIGNATURE:

DATE

AGENT: _____

ADDRESS: _____
