

OUTDOOR RECREATIONAL CLUBS QUESTIONNAIRE

Please answer all questions fully. Submit this Questionnaire with a **completed** ACORD Commercial Insurance Applicant Information Section and prior carrier loss runs.

Named Insured: _____

Do all professionals, and the business, have current licenses where required by statute? Yes No

If the business maintains a web site, state the address: _____

GENERAL INFORMATION

1. Check which applies to your club: For Profit Not-for-Profit Private Membership
2. How many years has applicant been operating club? _____
3. Date the club was organized? _____
4. Number of members in club? _____
5. Are you open to the public? Yes No
 Do participants sign waivers/hold harmless agreement? Yes No
 Are key safety rules posted? Yes No
6. Has your club had any claims in the last 5 years? Yes No
 If yes, provide claim detail, dates and amounts paid.

7. Does your club hunt or shoot live game as a club activity? Yes No
8. Does your club own (not lease) acreage of land? Yes No
 If yes, number of acres: _____
9. Does your club use tree stands or raised platforms? Yes No
10. Does your club allow the use of horses on site? Yes No
11. Does your club have vehicles, boats or mobile equipment **owned by or titled** in the name of the club? Yes No
 If yes, describe (i.e. ATV, boat w/HP, tractor). List only those owned by or titled in the name of the club.

12. Does your club allow use of member owned vehicles, boats, ATVs, snowmobiles, etc? Yes No
13. Does your club sponsor events not held on club premises? Yes No
 If yes, provide: Dates Expected: _____ Estimated Attendance Per Day: _____
 Location Held: _____
 Event Description: _____
14. Does your club own, lease or operate a shooting range? Yes No
 If yes, does range meet NRA (or equivalent) state, local or municipal guidelines? Yes No
 Is the land posted with "No Trespassing" signs? Yes No
15. Are there guidelines on the use of firearms and alcohol? If yes, **attach** a copy. Yes No



OPERATIONS

Hunting Club	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Sales (to public) \$ _____
Shooting Range	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Sales (to public) \$ _____
No. of rifle/pistol ranges?	_____		
No. of sport clay/trap/skeet stations?	_____		
No. of archery ranges?	_____		
Liquor Sales	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Sales (to public) \$ _____
Cooking/Concessions (if grease cooking, complete a restaurant questionnaire)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, sales: _____
Food Sales	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Sales (to public) \$ _____
Club House	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, area: _____
Is it rented to public?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Proshop	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, sales: _____
Paint Ball Operations	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, sales: _____
Fire Arm Repair	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Reloading supplies	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, sales: _____
			Where stored? _____
Firearm Sales: Are you a licensed dealer:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Sale of used firearms	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Rental loaning of guns	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, sales: _____
Overnight Accommodations	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, sales: _____
Lakes or Ponds	<input type="checkbox"/> Yes	<input type="checkbox"/> No	#_____ Acreage: _____
Any youth programs?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If so, describe # and type:	_____		

IMPORTANT NOTICE

I DECLARE THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE TO THE BEST OF MY KNOWLEDGE AFTER REASONABLE INQUIRY.

Any person who knowingly and with intent to defraud any insurance company or another person submits an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information containing any material fact thereto, commits a fraudulent act that is subject to criminal and substantial civil penalties. **I agree that any intentional concealment or misrepresentation of a material fact concerning this insurance or the subject thereof may void any policy issued.**

(As part of our underwriting procedures, a routine inquiry may be made to obtain applicable information concerning character, general reputation, and credit history. Upon your written request, additional information as to the nature and scope of the report, if one is made, will be provided.)

 Applicant Signature Title Date

 Producer Signature Date

 Producer Name and Address