Capitol Indemnity Corporation P.O. Box 5900

Madison, WI 53705

SPECIAL EVENTS & SPORTS QUESTIONNAIRE (to be attached to ACORD Application)

Named Insured Policy Number Policy Number							
Type of Events(s). Please submit Program or Advertisement with a schedule of events							
	Danca Basitala*	_	Davida Davisinanta				
		=	Parade - Participants				
			Parade - Sponsors				
_			Petting Zoos				
_	* *	=	Picnics Pica Pagetta				
_	•		Pig Roasts				
			Plays				
			Post Prom Parties				
			Punt, Pass & Kick*				
=			Racing-motorized*,				
_	· · · · · · · · · · · · · · · · · · ·	_	Refreshment Stands				
			Religious Meetings				
			Reunions				
			Rodeos I,				
_	_		Santa House				
			Sidewalk Sales				
			Singing Valentines				
			Special Gatherings				
	-		Street Dance				
			Tagged Fish Contests				
			Teen Dance				
			Theater Performances				
			Toys for Tots				
			Tractor Pulls',*				
			Turkey Shoots				
	Pancake Feed		Weight Pulling Contests',*				
П	Football Schools (no scrimmage or tackle)	П	Softball Schools				
$\overline{\Box}$		$\overline{\Box}$	Volleyball Schools				
_							
☐ Cheerleader Competition III. ATHLETIC OR SPORTS; LEAGUES, TOURNAMENT & SPORT EVENTS							
	Gers, reeleveler a srear Ever	110					
	Run-a-Thons		Volleyball Tournament				
			Walk-a-Thons				
			Walking				
Ш	1 CHIHS	Ш	waiking				
☐ Other Events (please list)							
		Program or Advertisement with a schedule of Dance Recitals* Dances Demonstrations in Stores Display Booths Dog & Cat Shows Dunk Tanks Easter Egg Hunt Exhibition Booths Exhibitions Fairs (Local and County) Festivals & Celebrations(see specific class) Flea Markets Golf Tournament/Hole-In-One Horse Shows*, Kiddie Pull' Lectures Markets Meetings Model Homes Model Legislature Mud Events-motorized/otherwise*', Musical Events - not hard rock Outstanding Youth Program Outings Pancake Feed Football Schools (no scrimmage or tackle) Soccer Schools EAGUES, TOURNAMENT & SPORT EVEN Run-a-Thons Soccer Tennis	Dance Recitals* Dances Demonstrations in Stores Display Booths Dog & Cat Shows Dunk Tanks Easter Egg Hunt Exhibition Booths Fairs (Local and County) Festivals & Celebrations(see specific class) Flea Markets Golf Tournament/Hole-In-One Horse Shows*, Kiddie Pull' Lectures Markets Maketings Model Legislature Musical Events - not hard rock Outstanding Youth Program Outings Pancake Feed Football Schools (no scrimmage or tackle) Soccer Schools Run-a-Thons Run-a-Thons Run-a-Thons Control of the second control control of the second control of				

Special Event or short term policies are written on a Non-Renewable Policy. If the company issues a policy, it will contain various exclusions including: Fireworks, Assault or Battery, Mechanical Amusement Devices, Injury to Participants, Velcro or Bungee Jumping.

- * Participants will be excluded (Optional coverage available for certain activities in III above)
- ** No Racing
- **H** Sponsor's Risk Only
- I Personal Injury Excluded
- Damage by Participants to property in their care, custody and control is excluded.
- Acceptable stadium, arena, or track (with proper fencing) submit diagram

REQUESTED INFORMATION

1.	Describe the program.		
2.	List all locations, including off premises locations.		
2	Total participants for all days		
Э. Λ	Total participants for all days Total expected spectators		
	Total games in sport programs		
5. 6	Time period (if a camp, include opening and closing dates).		
7	Interest of applicant (appropriate of a)		
8.	If the event is held within buildings, are premises appropriate for such use?	□Yes	□No
	Will there be overnight operations?	□Yes	
	If yes, a) total number staying overnight		
	b) number of overnight participants		
	c) describe sleeping facilities		
	d) are there working smoke detectors in the buildings?	□Yes	 □No
	e) are there working fire extinguishers?	□Yes	—
10.	Will any grandstands, bleachers, or seating stands be used?	Yes	□No
	Are they □permanent □portable		_
11.	If rodeo, horse show or similar type of exhibition, are fences,		
	barricades and pens adequate to confine animals?	□Yes	□No
12.	If this event is dangerous to the spectators attending, is there		
	a perimeter guard or barricade?	□Yes	□No
13.	List and describe any amusement devices whether owned or operated by the	applican	t
	(carnival rides excluded).		
14.	Are food products dispensed on premises by applicant?	□Yes	
	If yes, describe products and estimated receipts.		
15	Are fireworks part of the program? (If yes, certificate of insurance required)		
	Do you provide transportation?	□Yes	\Box No
10.	If yes, describe.		
	11 yes, asserted:		
17.	Please describe your procedure in case of injury or medical emergency.		
18.	For special events, list the law enforcement agency(s) involved.		
10	Is there Accident Medical coverage on campers/athletes?	□Yes	\square No
1).	If yes, name of insurance company.	□103	

•	ever been canceled or non-renewed? t applicable in Missouri).	□Yes □No
I HEREBY DECLARE TO THE BE	ST OF MY KNOWLEDGE AND BELIEF T	HAT ALL THE FOREGOING STATEMENTSARE
COMPLETE AND TRUE, AND TH	HAT THESE STATEMENTS ARE OFFERED	O AS AN INDUCEMENT TO THE COMPANY TO
ISSUE THE POLICY FOR WHICH	I AM APPLYING. IT IS UNDERSTOOD A	ND AGREED THAT COMPLETION OF THIS
QUESTIONNAIRE DOES NOT BII	ND THE INSURANCE COMPANY.	
Signature of Applicant	Date	