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## CLUBS QUESTIONNAIRE (CIVIC, SOCIAL, SERVICE, NON-PROFIT ORGANIZATIONS)

Please answer all questions. Submit this questionnaire with a completed ACORD application prior carrier loss runs.

Named Insured: \_\_\_\_\_

Website: \_\_\_\_\_

### PROHIBITED CIRCUMSTANCES

If any of the questions in this section are answered "YES", you are not eligible for coverage.

1. Is the applicant any of the following types of clubs?  Yes  No
- |                            |                   |                           |
|----------------------------|-------------------|---------------------------|
| Dating/Encounter Club      | Labor Union       | Gentlemen's Club          |
| School Fraternity/Sorority | Aircraft Club     | ATV Club                  |
| Snowmobile Club            | Trade Association | Motorcycle Club           |
| Auto Club**                | Gun Club**        | Clubs involving animals** |
| Ski Club**                 |                   |                           |

\*\*Can be considered for coverage in CSIC. Participants must be excluded using CGL 343.

2. Is the applicant a lobbying or advocacy group that involves controversial issues, marches or demonstrations (Right to life, animal rights, etc.)?  Yes  No

### GENERAL INFORMATION

1. Does the applicant provide any legal, health/medical, governmental type social work, counseling, environmental services or financial advice?  Yes  No
2. Is the applicant involved in any type of community cleanup or fix up projects?  Yes  No
3. Does the applicant work with minors?  Yes  No
4. Does the applicant have 50 or more volunteers?  Yes  No
5. Does the applicant offer any inflatable amusement devices?  Yes  No
6. Does the applicant offer any mechanical amusement devices?  Yes  No
7. Does the applicant serve alcoholic beverages?  Yes  No
8. Are alcoholic beverages provided without a charge?  Yes  No
- a. Does the club have special events that serve alcohol free of charge?  Yes  No
- b. Is the age of all patrons consuming alcohol verified?  Yes  No
- c. Are all servers required to take alcohol server training (TIPS, etc.)?  Yes  No

**OTHER INFORMATION**

- 1. What is the area of the club house? \_\_\_\_\_
- 2. Number of members? \_\_\_\_\_
- 3. Number of lakes, ponds, rivers and/or similar water exposures? \_\_\_\_\_
- 4. Area of any rental halls? \_\_\_\_\_
- 5. Number of boats or canoes not available for rent? \_\_\_\_\_
- 6. Sales from rental of boats? \_\_\_\_\_
- 7. Number of boat docks/piers? \_\_\_\_\_

If there are any food sales, please complete the **Restaurant Questionnaire – CGE 119.**

If there are any liquor sales, please complete the **Liquor Questionnaire – CGE 115.**

If there are events open to the public, please complete the **Special Events Questionnaire – CGE 121.**

**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