



# Associations and Clubs: Supplemental Questionnaire

## APPLICANT INFORMATION

NAMED INSURED \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_

FEIN \_\_\_\_\_

WEB ADDRESS \_\_\_\_\_

## UNDERWRITING INFORMATION

1. Name of club: \_\_\_\_\_

- Country club       Golf club
- Nonprofit           Public club
- Other (describe) \_\_\_\_\_

2. Does the club lease or own the building? .....  
.....  YES  NO

3. Numbers of members: \_\_\_\_\_

4. Organizational purpose of the club: \_\_\_\_\_  
\_\_\_\_\_

5. Does the club get involved in any fundraisers? .....  YES  NO

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_

6. Any special events?.....  YES  NO

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_

7. Dance floor? .....  YES  NO

If yes, size: \_\_\_\_\_

8. Does the club operate restaurants or bars that are open to the public? .....  YES  NO

Bar receipts ..... \$ \_\_\_\_\_

Food receipts..... \$ \_\_\_\_\_

Seating ..... \_\_\_\_\_

9. Is the building rented to others? .....  YES  NO

If yes, how often? \_\_\_\_\_

Gross sales: ..... \$ \_\_\_\_\_

Liquor provided?.....  YES  NO

10. Swimming pool? .....  YES  NO

If yes, a. Indoor? .....  YES  NO

b. Outdoor? .....  YES  NO

If outdoor, fenced with self-closing gate? .....  YES  NO

c. Diving board?.....  YES  NO

d. Slide? .....  YES  NO

e. Depth markings?.....  YES  NO

f. Deepest pool depth? .....  YES  NO

g. Life guards? .....  YES  NO

11. Any cooking on premises? .....  YES  NO

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_

If yes, automatic extinguishing system?  YES  NO

If yes, UL 300 compliant? .....  YES  NO

Automatic shutoffs? .....  YES  NO

Last inspected: ..... \_\_\_\_\_

12. Activities available (Describe all "yes" responses below):

a. Watercraft? .....  YES  NO

b. Saddle animals? .....  YES  NO

c. Skeet and trap range? .....  YES  NO

d. Fireworks display? .....  YES  NO

e. Ice skating? .....  YES  NO

f. Haunted house sponsored?.....  YES  NO

g. Volleyball court?.....  YES  NO

h. Horseshoe pitching? .....  YES  NO

i. Other? \_\_\_\_\_

Explain any "yes" responses: \_\_\_\_\_  
\_\_\_\_\_

13. Any sports teams sponsored?.....  YES  NO

If yes, to what extent? \_\_\_\_\_

14. Any tournaments sponsored? .....  YES  NO

If yes, to what extent? \_\_\_\_\_

15. Does the club sponsor trips?.....  YES  NO

If yes, a. What were the destinations of previous trips?

\_\_\_\_\_  
\_\_\_\_\_

b. Number of trips?..... \_\_\_\_\_

c. Responsible for transportation? .....  YES  NO

d. Responsible for accommodations? .....  YES  NO

**N.J. Law P.L 1995, c. 132:** Any Person who includes any false or misleading information on the application for an insurance policy is subject to criminal and civil penalties. The information in this application is correct to the best of my knowledge and belief.

**For PA Submissions:**

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties. The information in this application is correct to the best of knowledge and belief.

**I certify that the information in or attached to this questionnaire is true, complete and correct based on business records and my personal knowledge. I grant United Fire Group authorization to order a credit report on my business and/or me.**

_____		_____	
Owner or officer's name		Agent's name	
_____		_____	
Title		Agent's signature	Date
_____		_____	
Owner or officer's signature	Date	Expiring policy number, if applicable	