

**COLONY INSURANCE COMPANY – COLONY SPECIALTY INSURANCE COMPANY  
 PELEUS INSURANCE COMPANY**
**CONTRACT DIVISION – EXERCISE AND HEALTH CLUBS - SUPPLEMENTAL APPLICATION**

ACORD Application also required - Check all applicable checkboxes below

<b>General Agent:</b>		<b>Date:</b>
<b>Insured:</b>		
<b>Insured Mailing Address:</b>		
<b>Insured's Web Address:</b>		
<b>Insured Contact Name:</b>		<b>Phone Number:</b>

**PROHIBITED**

- 24 hour facilities, IF not equipped with panic buttons and video surveillance
- Boxing, Fighting or Wrestling, IF Cage boxing, Professional MMA's, Ultimate fighting championships
- Martial Arts Clubs, Schools or Studios, IF semi-professional or professional
- Medical exposures such as Doctors/Nurses/Physical Therapists on staff, any type of blood analysis, Stress testing
- Tanning bed(s), IF attendant does not control timers
- Trampolines
- Weapons exposures including but not limited to darts, firearms, knives, or swords
- Weight loss centers, diet centers or diet-related spas

**YEARS IN BUSINESS / EXPERIENCE**

\_\_\_\_\_ Years in business as the 'Named Insured' indicated on this application

\_\_\_\_\_ Years' experience in the operations indicated on this application - Attach resumes if available

- Has applicant had an insurance policy cancelled or non-renewed in past 3 years? If yes, explain.  
*(Missouri Applicants - Do not answer this question)*

- Applicant in receivership
- Bankruptcy (Chapter 7, 11 or 13) has been filed in past 5 years

**LOSS HISTORY**

- Three years of loss history information provided on ACORD application or attached to this application

**EXERCISE AND HEALTH CLUBS - SUPPLEMENTAL APPLICATION**

**OPERATIONS / EXPOSURES**

- Babysitting / Childcare Services – Age groups:
  - Birth to 6 months
  - 16 months to 2 years
  - 2 years to 4 years
  - 4 years to school age
  - School Age
  
- Ratio of staff to children: 1 to \_\_\_\_\_
  
- Play area(s) if outdoors are fully fenced with self-locking gates
- State required certifications in place
- Waiver and release of liability specific to babysitting is in contract

- Off Premises Activities (describe)

- Snack bar
- Restaurant (Requires Restaurant Supplemental Application)
- Sauna(s) / Steam Room(s)
- Swimming Pool(s) Number of swimming pools: \_\_\_\_\_
  - Meets Federal swimming pool/spa drain cover standards found in the Virginia Graeme Baker Pool and Spa Safety Act
  - Depths marked, Life safety equipment placed in pool area, Rules posted
  - Competitions     Diving Teams     Swimming Instruction
  - Fenced completely with self-latching gate(s), if pool is outdoors
  - Life guards     CPR trained     Subcontracted out
  - Slides or diving boards    Maximum height: \_\_\_\_\_ feet
- Tanning Beds (if exposure present submit separate tanning bed supplemental application)

**SUBCONTRACTORS / INDEPENDENT CONTRACTORS**

- Uninsured subcontractors are not acceptable
  - Professional Trainers and/or Masseuses who are independent contractors provide certificates of insurance that confirm liability insurance and professional coverage is in place
- Risk Transfer – Subcontractors: (check if applicable)
  - Additional Insured – Status granted to you on the subcontractor’s policy
  - Certificates of Insurance - Always obtained from a subcontractor prior to any work being done for you
  - Limits of Liability - Subcontractors are required to carry limits equal or above your own

**EMPLOYEES**

- CPR trained staff member (at least one) is always on duty during hours of operation
- Certifications, if required by state law, are verified for all instructors

**CLUB MEMBERS**

- Number of annual memberships: \_\_\_\_\_
- Club member contracts include a ‘Release of Liability’ and ‘Waiver’

**RECEIPTS**

All Operations	\$
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**EXERCISE AND HEALTH CLUBS - SUPPLEMENTAL APPLICATION**

**PLANNED EXPANSION OR NEW ACTIVITIES IN COMING POLICY TERM**

New activities or expansion is anticipated (describe):

**COVERAGE OPTIONS - LIABILITY (check if you would like an optional quote on any of the following)**

- Employee Benefit Liability – U058
- Employment Practices Liability Insurance – U817 (Not available in AR, LA, MT, NM, NY, VT)
- High Limits General Liability
- Identity Recovery – i.e. Identity Theft – U651
- Medical Expense Limit of \$10,000 rather than \$5,000
- Stop Gap Liability – U066

**COVERAGE OPTIONS - PROPERTY (check if you would like an optional quote on any of the following)**

- Building Ordinance or Law (Increased Cost of Construction) – U750
- Equipment Breakdown – U522 & U523  
Property Coverage Enhancement:  Bronze – U777C  Silver – U777B or  Gold – U777A
- Signs (Outdoor) – CP1440
- Water Back Up and Sump Overflow – U548

**GENERAL FRAUD STATEMENT (Not applicable in all states.)**

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, may be committing a fraudulent insurance act, and may be subject to a civil penalty or fine.

*The undersigned is an authorized representative of the applicant and certifies that reasonable inquiry has been made to questions on this application. He/She certifies:*

- The answers are true, correct and complete to the best of his/her knowledge.*
- They agree to the Privacy and Fraud provisions found in the ACORD-125 (Commercial Insurance Application) and understand those provisions also apply to this supplemental application.*

**SIGN AND DATE**

PRODUCER'S SIGNATURE	DATE
APPLICANT'S PRINTED NAME	DATE
APPLICANT'S SIGNATURE	DATE