

Specialty Insurance Coverage for Sports Facilities and Family Fun Centers



- Accident Insurance Coverage
- Liability and Abuse Insurance Coverage

Francis L. Dean & Associates, LLC



The Leader in Sports, Leisure and Entertainment Insurance

- Amusement Centers
- Attendant Operated Mechanical Rides
- Batting Cages
- Bowling
- Bumper Cars
- Coin Operated Mechanical Rides
- Driving Ranges
- Family Fun Centers
- Go Karts
- Laser Tag
- Miniature Golf
- Mobile Amusement Centers
- Sport Facilities

Submission Requirements

- Please provide the following with this application:
- Currently valued insurance company loss runs for the current policy period plus four (4) prior years
 - Ride Inspection Forms
 - Copy of waivers and release
 - Copy of written emergency procedures

Please complete the following application. Once the application is received, a quotation will be sent within one business day. As activities vary, some questions may not be applicable. Please indicate N/A where necessary.

General Information

Please print or type

Facility Name	Type of Operation			
	Corporation	Individual/Sole Proprietor	Partnership/Joint Venture	
	Limited Liability Company (LLC)	Other:		
Facility Address	City	State	Zip	
Full Mailing Address	City	State	Zip	
Contact Name	Phone Number	Email Address		
Website Address	Date of Formation	How do you wish to receive your quotation?		
		Via Fax		
Person responsible for general operation of activities	Years and type of experience	Via Email		
		Via U.S. Mail		
Effective Date	Hours of Operations	Annual Payroll		
Number of employees	Average annual attendance	Annual Gross Receipts		
Square Footage of Facility	Do you run criminal background checks on employees?	YES	NO	
	Does the application have a formal safety training program for employees?	YES	NO	
Does the applicant have surveillance cameras?	YES	NO	Does applicant have central station fire and burglar alarm?	
			YES	NO
Does your facility include an air supported structure and/or dome?	YES	NO	Does the applicant have an automatic extinguishing system over deep fat fryers, grills, & stoves?	
			YES	NO
Are rules posted conspicuously and enforced at all times?	YES	NO	Are incident reports completed and maintained for all injuries, regardless of severity?	
			YES	NO
Are participants required to sign a Waiver & Release of Liability for all activities? If yes, please provide a copy.			YES	NO
Are copies of the Waiver & Release of Liability kept on file?	YES	NO	Are the referees or coaches employees of your organization?	
			YES	NO
Do you have a Risk Management Plan?	YES	NO	Are facility/playing field inspections and maintenance performed?	
			YES	NO

Are parking lots well-lit and patrolled?	YES	NO	Is a log kept of inspections and maintenance performed?	YES	NO
Does the facility rent or repair sports equipment?	YES	NO	Are written emergency procedures in place? (If yes, please attach copy)	YES	NO
Are parking lots well-lit and patrolled?	YES	NO	Is the facility locked so that patrons cannot use it when closed?	YES	NO
Do you provide childcare on site?	YES	NO	Is your current insurer non-renewing coverage?	YES	NO
Have any liability claims been paid by your insurer during the last 3 years? If yes, please describe claims.					

Insurance Information

Current Insurance Company

Current Expiring Premium

Agility/Conditioning Facilities

Annual Receipts			Does your facility offer Parkour Ninja Warrior Training Facilities?	YES	NO
Does your facility offer MMA/MMA-like/Boxing training?	YES	NO			

Arcade

How many machines			Annual Receipts		
Are all machines properly grounded?	YES	NO	Are there any coin-operated rides? If yes, please see Coin Operated Mechanical Rides.	YES	NO

Attendant Operated Mechanical Rides

Number of Mechanical Rides

Annual Receipts

Batting Cages

How many Cages			Annual Receipts		Minimum age requirement
Maximum velocity (over 80 mph ineligible)			Are batting cages limited to one (1) person per cage?	YES	NO
Are batting cages self-contained or closed?	YES	NO	Are markings clearly displayed for home base and hitters?	YES	NO
Machine velocity checked or calibrated?	YES	NO	Are pitching machine settings able to be altered by hitter?	YES	NO
Light or similar indicator when last ball has been pitched?	YES	NO	Helmet or other safety equipment required to be used by participants in cages?	YES	NO
Are participants allowed to swing bats outside of cages?	YES	NO			

Billiards/Pool Tables

How many Tables

Annual Receipts

Bumper Boats

How many Boats			Annual Receipts	Manufacturer		
Maximum engine horse power			Age/Height Requirements - at least ten (10) and 48"?		YES	NO
Height of observation fence			Is water rescue equipment (throw rings, shepherd hooks present)?		YES	NO
Is the depth of water 4' or less?	YES	NO	Does gas storage meet NFPA/Local fire code?		YES	NO
Is water rescue equipment (throw rings, shepherd hooks) present?	YES	NO	How are propellers protected?			

Bumper Cars

How many Cars			Annual Receipts	Age of oldest unit:		
Minimum Height Requirements			Type of Seat Belt		YES	NO
Are cars inspected daily?			Cars equipped with dash and headrest pads?		YES	NO
Are wheel pads on steering wheels?	YES	NO	Are spectators restricted from floor area when cars are in motion?		YES	NO

Bungee

How many			Annual Receipts			
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Children's Indoor Play Center:

Annual Receipts			Are parents/guardians required to stay on site with children?		YES	NO
Are all rules posted?	YES	NO	Are age and height requirements posted and enforced?		YES	NO
Are there ball or foam pits?	YES	NO	Is protective matting used to prevent injuries from slip and fall?		YES	NO
Is all equipment inspected daily?	YES	NO	Are steel polls and bolts covered with thick padding?		YES	NO
Is all equipment cleaned and sanitized daily?	YES	NO	Is all equipment manufactured by a commercial manufacturer and commercially installed?		YES	NO
Do you have any inflatable or trampoline devices?	YES	NO	Are all areas monitored by at least one (1) employee during operating hours?		YES	NO

Coin Operated Mechanical Rides

How many rides			Annual Receipts	Age of oldest unit:		
Are all rides properly grounded?	YES	NO	Is there a daily maintenance checklist with written records kept?		YES	NO

Driving Range

How many stalls			Annual Receipts	Partitions between stalls?	YES	NO
Maximum one person allowed per tee box?	YES	NO	Do all ranges face away from the public access areas or other attractions?		YES	NO

Escape Room

Annual Receipts		Number of rooms			
Maximum number of people in a room		Do you use paint bombs, exploding paint or exploding powder?		YES	NO
Please describe if games involve physical activities, animals, amusement devices, stairs, tunnels, trap doors, or actors:					
Are all exits illuminated?		YES	NO	Is the door unlocked during the puzzle/game?	
Do you offer any sessions longer than 2 hours?		YES	NO	Do you offer axe throwing or rage room experiences?	
Do you require adults or chaperones for participants under the age of 12?		YES		NO	

Inflatable Rental with or without Operators

How many	Annual Receipts
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Go Kart Rides

How many karts		Annual Receipts		Number of tracks	
Is maximum speed (mph) limited to 10 miles per hour?		YES	NO		
Is the track(s) indoor, outdoor, or both?					
If outdoor, is the track(s) fenced?		YES	NO	Do fences meet American Society for Testing and Materials (ASTM) F-24 requirements?	
Maximum number on track at any one time		What is the surface of the track?			
The fuel is Gas Electric		If gas, is there appropriate protection and ventilation?			
If gas, is the fuel kept in a restricted area?		YES	NO	If gas, are signs posted prohibiting smoking?	
Are seat belts required?		YES	NO	Is there a maintenance program in place with logs of all maintenance done to each go kart?	
Are participants at least 48" tall?		YES	NO	Are participants at least eight (8) years of age?	
Is there equipment with governors to control speed?		YES	NO	Are the karts equipped with roll bars and bumper guards?	
Are all Go Karts equipped with the following:		Is there an operator cut off system in place?			
Padded Steering Wheel		YES	NO	Are track rules clearly and prominently displayed?	
Padded Head Rest		YES	NO	Are there signs posted stating there is no racing, bumping, or reckless driving permitted?	
Safety/Seat belts for each seat		YES	NO	Are any obstacles within thirty (30) feet of track padded or removed for safety?	
Wheel enclosures		YES	NO	Is there a minimum of two (2) qualified staff members on the track during go kart activities?	
Maximum speed of 10 miles per hour?		YES	NO		

Laser Tag

Annual Receipts		Minimum Age		Minimum Height	
Maximum participants per game		Can employees view all participants in all game sections by surveillance cameras and/or by employees on the gaming floor?		YES	NO
Is there an emergency lighting system?		YES	NO	Is rental of Laser tag equipment prohibited?	
				YES	NO

Miniature/Putt-Putt Golf

How many holes

Annual Receipts

Do fountains and waterfalls have ground fault interrupters in place?

YES

NO

Paintball/Airsoft

How many fields

Annual Receipts

Pool *Please contact your agent to obtain a pool supplemental questionnaire*

How many pools

Annual Receipts

Rock/Climbing Wall

How many routes

Annual Receipts

Roller Skating or Ice Skating Rinks

How many rinks

Annual Receipts

Ropes Course Facilities

How many

Annual Receipts

Skate Park

Annual Receipts

Is your facility open to the public?

YES

NO

Trampoline

How many trampolines

Annual Receipts

Virtual Reality/Mobile Amusement

Annual Receipts

Other Activities

Annual Receipts

Description

Food Operations/Concession Stands

What is the food operation exposure?

- Full Serve
- Snack Bar/Concession Stand
- Lessor's Risk

Are portable fire extinguishers provided in the kitchen?

YES NO

Is Automatic Extinguishing System (AES) UL 300 compliant?

YES NO

Do you have a contract for cleaning the hoods and ducts?

YES NO

How often are they cleaned?

Monthly Quarterly Semi-Annually

How often are filters cleaned?

Indicate which of the following equipment is present and the number of each:

- | | |
|--------|-------------|
| Ranges | Broilers |
| Grills | Deep Fryers |
| Overs | Griddles |

Acknowledgments and Signatures

The undersigned being authorized by and acting on behalf of the applicant and all persons or concerns seeking insurance, has read and understands this proposal and declares all statements set for herein are true, complete, and accurate. The undersigned further declares and represents that any occurrence or event taking place prior to the inception of the policy applied for which may render inaccurate, untrue, or incomplete any statement made herein will immediately be reported in writing to the insurer. The undersigned acknowledges and agrees that the submission and the insurer's receipt of such report prior to the inception of the policy applied for is a condition precedent to coverage.

It is understood and agreed that the completion of this application shall not be binding either to the Proposed Insured or to the Company until accepted by the Company or Companies.

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly provides false information in an application for insurance may be guilty of a crime and may be subject to civil fines and criminal penalties. I certify that the above information is true and coverage is not applicable until accepted.

.....
Signed for the Proposed Policyholder

.....
Signed by Licensed Agent

.....
Date

.....
Licensed Agent Name

Agency Name

Agency License Number

Agent Phone Number

Agent Email Address

Agency Mailing Address

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FAX (630) 665-7294 • www.fdean.com

Processing Center:

12800 University Drive, Suite 125
Fort Myers, FL 33907