



**CLUBS – CIVIC, SERVICE, OR SOCIAL SUPPLEMENT**  
(Include Acord application)

Applicant's Name: \_\_\_\_\_ Location Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Applicant is:  Individual  Corporation  Joint Venture  Other (Specify): \_\_\_\_\_

The purpose of the club is: \_\_\_\_\_  
(Attach copy of bylaws, newsletters, rules or promotional material)

The club is:  Public  Private Date Established: \_\_\_\_\_

Is there a clubhouse owned, leased or rented by the insured?  Yes  No Is it rented to others?  Yes  No

Number of members: \_\_\_\_\_ Active \_\_\_\_\_ Inactive

Locations where meetings are held: \_\_\_\_\_  
\_\_\_\_\_

List special events held last year: \_\_\_\_\_

List events and activities planned this year, along with estimated attendance and location(s) where they will be held:  
\_\_\_\_\_  
\_\_\_\_\_

Are there any premises, land, vehicles, pools, boats, amusement devices, guns, power equipment, etc. owned or leased by the club?  Yes  No  
If yes, provide full details. \_\_\_\_\_  
\_\_\_\_\_

Is any alcoholic beverage served at any club meeting or events?  Yes  No  
If yes, who furnishes and serves the beverage? \_\_\_\_\_  
(Policy does not cover Host liquor or Liquor Liability)

Does the applicant use independent contractors?  Yes  No  
If yes, please provide details of work performed by independent contractors. \_\_\_\_\_  
\_\_\_\_\_

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime. This application does not bind any of the parties to complete the insurance transaction.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Producer's Signature

\_\_\_\_\_  
Date