

# Paintball Event General Liability Application (Off-premise)

**EVENT DATE(S)** \_\_\_/\_\_\_/\_\_\_ ---- \_\_\_/\_\_\_/\_\_\_ **(REQUIRED)** (Include set up and take down)

APPLICANT (LEGAL NAME OF BUSINESS)				Policy Number
MAILING ADDRESS	CITY	STATE	ZIP	WWW. FIELD WEBSITE
OWNER/OPERATOR/MANAGER	( ) MOBILE-DAYTIME PHONE	( ) FASCIMILE	EMAIL ADDRESS	

1. **TOTAL ESTIMATED PARTICIPANTS** (3 days with 100 players each day = 300) \_\_\_\_\_
2. DESCRIPTION OF EVENT (Ex: Tournament, Speedball, Scenario, Shooting Booth) \_\_\_\_\_
3. Will you have any vendors at this event supplying compressed air, food concessions, etc? Yes\_\_\_ No\_\_\_ If yes, they must provide us with a Certificate of Insurance naming you, the landlord and locations mentioned below as Additional Insureds for the dates of this event. Required limits are General Liability coverage (Including Product Liability coverage) of at least \$1,000,000 per occurrence / \$2,000,000 aggregate.
4. Will you be providing any services or activities other than paintball on the premises at this event? (Example: BMX, Go-Karts, etc.)? Yes\_\_\_ No\_\_\_ If yes, describe: \_\_\_\_\_
5. Do you agree to adhere to the MIC field operator and player safety requirements for this event? Yes\_\_\_ No\_\_\_
6. Will all participants be required to sign waivers? Yes\_\_\_ No\_\_\_ Will parents and/or legal guardians be required to sign waivers on behalf of all minors (under 18)? Yes\_\_\_ No\_\_\_ Will first aid supplies be on site? Yes\_\_\_ No\_\_\_
7. Will alcohol be sold or permitted at this event? Yes\_\_\_ No\_\_\_ If yes, please submit your rules regarding consumption.
8. Will spectators be allowed at this event? Yes\_\_\_ No\_\_\_ Will spectators be kept a minimum of **5 feet** away from the netting at all times? Yes\_\_\_ No\_\_\_ Describe: \_\_\_\_\_
9. Will players be allowed to fill their own tanks at this event? Yes\_\_\_ No\_\_\_
10. Do you have any motorized vehicles (including tanks) that will be used at this event? Yes\_\_\_ No\_\_\_
11. Number of working chronographs? \_\_\_\_\_ Maximum Velocity allowed? Indoor \_\_\_\_\_ (fps) Outdoor \_\_\_\_\_ (fps)
12. Where will CO2 Tanks be stored and how will they be secured? \_\_\_\_\_

**NAME AND LOCATION OF EVENT/VENUE:** \_\_\_\_\_

Event Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

LANDLORD (Property owner at event location) Name: \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_ Does the landlord/venue require a Certificate of Insurance? \_\_\_\_\_

If a Certificate of Insurance is required for the landlord or any other entity with an insurable interest in this event, the complete name, address and phone number is required in order to provide a certificate.

**THIS IS NOT A BINDER OF COVERAGE. UNDERWRITING APPROVAL MUST BE GRANTED AND CERTIFICATE(S) ISSUED BEFORE COVERAGE IS IN FORCE.**

Signature of Applicant	Date	Signature	Agent	Date
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## Field Diagram Supplement (Required)

Field Name: \_\_\_\_\_

The diagram is critical in our underwriting criteria and directly affects the rating for your paintball insurance premium. Please review the sample diagram and complete a "small scale" drawing of your field that clearly shows the parking area, staging area, spectator area, chronograph area, pro-shop, and location of each field, clearly indicating the distances between the field of play and non-play areas.

- - - Warning Tape
- ..... Netting
- △ Goggles On
- ⊕ Barrel Plugs In
- Safety Rules
- ⊙ No Trespassing/Paintball in Play

### SAMPLE DIAGRAM

