

Skating Facility Inflatables Supplemental Application

Separate application required for each location

I. General Information			
Named Insured		DBA	
Facility Address			
Website		Email	

II. Inflatable Information (Answer for each inflatable)			
Type of Inflatable	Location in Stadium	Average Number of Participants for Each Inflatable	Age Group
Is inflatable: <input type="checkbox"/> Owned <input type="checkbox"/> Rented <input type="checkbox"/> Leased			
What safety equipment and guidelines are required of the participants: <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div>			
Are parents required to remain at the site? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are there any requirements to enter the inflatable (removal of shoes, glasses, etc.): _____			
What type of training/background do the employees have that are operating the inflatables: _____			
Describe security and evacuation procedures: _____ <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div>			
Is first aid available? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please provide medical/safety procedures in place: _____ <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div>			
What is the realistic response time for medical assistance: _____ <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div> <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div>			
Are waiver/release or consent forms signed by participants/legal guardians? <input type="checkbox"/> Yes <input type="checkbox"/> No			
What precautions are taken to prevent unauthorized persons from entering restricted areas: _____ <div style="border-bottom: 1px solid black; height: 15px; margin-top: 5px;"></div>			

VIII. Requested Items

Copies of brochures, guidelines, manuals, etc. pertaining to the inflatable.

Copy of Waiver/Release form signed by all participants.

Copy of rented/leased contract.

I understand that the insurance company in determining whether to provide a quotation for insurance coverage will rely on the information contained in the application and all other information being submitted. I hereby warrant, represent and confirm that, to the best of my knowledge, all information provided is complete, true and correct.

Applicant's Signature

Date