



RECREATIONAL SOFTBALL AND BASEBALL
INSURANCE APPLICATION

GENERAL INFORMATION: (Please Print or Type)

1. Official Name of the Organization: _____

2. Main Mailing Address: _____
_____ Postal Code: _____
3. Telephone Number: _____ Fax Number: _____
4. Name of Contact for Insurance Program: _____
5. Address of Contact for Insurance Program: _____
6. Years the Organization has been operating: (give date) _____
7. Application for this Insurance is:
_____ Team _____ League _____ Association
_____ Owner/Operator _____ Corporation Other: _____
8. Affiliations:
a) Provincial: _____
b) National: _____

9. UNDERWRITING INFORMATION

BASEBALL

Number of players Under 18: _____

Number of players Over 18: _____

SOFTBALL

Number of players Under 18: _____

Number of players Over 18: _____

Estimated Total Annual Receipts: _____

10. Are all practices, contest, exhibition games, and other events sanctioned and supervised by the organization. _____ YES _____ NO



11. Do you have any potential for travel to the United States?: _____

12. Is there any U.S. or foreign participants? __Yes __No

13. Confirmation that all participants sign waivers

14. PAST INSURANCE HISTORY:

A. Coverage and Loss History:

Indicate limits carried, corresponding premiums paid and total losses for the past three(3) years (attach company loss history - verification if required).

Coverage:	Limit	Premium	Total Losses
Participant Liability	_____	_____	_____
Accident Policy	_____	_____	_____

B. Name of Current or past Insurance Carrier. _____

C. Has Insurance Carrier ever canceled or refused your organization coverage?

_____ YES _____ NO

If yes, please explain: _____

15. Any additional information or remarks that may assist us in evaluating your application please provide.

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 companies underwriting this application.

Desired effective date: _____ Expiry date: _____

Signature of Applicant

Position

Date