



CANADIAN SPORTS INSURANCE BROKERS

FITNESS INSTRUCTOR PACKAGE INSURANCE APPLICATION

Name of Insured

Mailing Address Postal Code

Telephone Website

Applying as: Group Exercise Instructor Personal Trainer
 Other

If Other:

Number of employees/Independent Contractors/Trailers to be included:

Total Receipts Desired Effective Date

Are clients required to sign a "Waiver of Liability"? YES NO
If YES, please attach sample.

Do you own, lease or rent space on annual basis? YES NO
Number of hours worked weekly

PROFESSIONAL BACKGROUND

Please identify Membership in, or Certification by: (please attach copy of certification)

Are you involved in any pre/post natal classes or post rehabilitation?

Is there any hot yoga? (ie. Bikram, Moksha, etc) offered? Maximum Temperature:

YES NO

Do you operate your business outside of Canada?

Describe any additional operations (kickboxing, etc)

Any outdoor activities? YES
 NO

If YES, any outdoor cycling?

PROPERTY COVERAGE

Is property coverage required?

YES NO

Special Risk is able to offer the following coverage for an additional premium of \$100.00 subject to a \$500 deductible:
\$5,000.00 Miscellaneous Property Floater, ACV, 100% Co, Max. \$500 payable any 1 item unless scheduled
\$5,000.00 Extra Expense

if additional coverage/higher limits are required, please advise your broker. A full property application may need to be completed.

Main Storage Location:

Construction Year Built

Any Upgrades?

of Stories Sprinklered? Alarmed? Local

Monitored None

PREVIOUS INSURANCE/LOSS HISTORY

Previous Insurance Company Is renewal being offered?

5 year loss history

This application does not bind the applicant or the Company to complete this insurance but it is agreed that the information contained herein shall be the bases of the contract should a policy be issued.

IMPORTANT NOTICE: As part of our underwriting procedure, a routine inquiry may be made to obtain applicable information concerning carious risk characteristics. Upon written request additional information as the the nature and scope of the report, if one is made, will be provided.

It is mutually agreed between the Company and the application that any inspection of the premises, operations or any matter pertaining to insurance afforded by the Company, is made for the use and benefit of the Company and is not to be relied upon by the applicant in any respect.

Application Signature: X

Date:

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