

PAINTBALL AND LASER TAG QUESTIONNAIRE

Applicant Name _____ Effective Date _____

Agency Name _____ Agency # _____

- Please attach 5 Year Loss Runs
- Please attach photos of any climbing structure
- Please attach a copy of Participant Waiver
- Please attach a copy of Safety Rules

Applicant Information

1. Years of operation _____
2. Web site _____
3. Please provide the total number of full time (including owners and officers) employees _____
Total number of part time employees _____
4. How many years under current management? _____

Operations Information

5. Please describe your operations: _____
6. Total annual receipts: \$ _____
Breakdown of your annual receipts:
Paintball: \$ _____
Laser tag: \$ _____
Equipment rental: \$ _____
Pro-shop: \$ _____
Food & beverage sales: \$ _____
Other: \$ _____ (please describe) _____
7. How often are the playing areas inspected? _____
8. What is the minimum age for participants? _____
9. Are adults and children allowed to participate on the same playing area at the same time? ___ Yes ___ No
10. Do you require a game master/referee for each group in the playing area during all activities? ___ Yes ___ No
11. What is the maximum ratio of participants to game master/referee? _____
12. Are there any climbing structures? (If yes, provide photos.) ___ Yes ___ No
13. Do you inspect your equipment after each use? If no, describe your equipment inspection procedure. ___ Yes ___ No

14. Are participants allowed to bring their own equipment? ___ Yes ___ No
If yes, do you inspect all equipment prior to play and recalibrate if necessary? ___ Yes ___ No

Safety Information

15. Are safety rules clearly posted? (Please attach a copy of safety rules.) ___ Yes ___ No
16. Are all participants instructed on safety procedures prior to being allowed to play? ___ Yes ___ No
17. Are all participants instructed on any natural or man-made hazards on the playing field (such as water, cliffs, ravines)? ___ Yes ___ No
18. Are all participants required to sign a waiver? (Please attach a copy of waiver.) ___ Yes ___ No
19. Are emergency exits clearly marked? ___ Yes ___ No

Paintball Only

- 20. Are all participants required to wear facemasks or goggles? Yes No
- 21. Do all your facemasks or goggles meet or exceed current ASTM standard F1776? Yes No
- 22. Do all your guns have a barrel blocking device? Yes No
- 23. Do all your guns have a properly built and secured barrel stock? Yes No
- 24. What is the maximum velocity allowed? _____fps

The information I have provided is true and accurate to the best of my knowledge. I have not willfully concealed or misrepresented any material fact or information. I understand that if the information supplied on this questionnaire changes between the date of the questionnaire and the inception date of the policy period, I will notify SECURA Insurance Companies of such change. I understand that completion of this questionnaire does not compel the company to provide coverage.

Applicant's Signature

Date

Agent's Signature

Date