



Airsoft Field General Liability Insurance Application

www.airsoftinsurance.com

423-538-1100

800-801-1915 (Fax)

PROPOSED EFFECTIVE DATE (REQUIRED) ____/____/____ CURRENTLY INSURED? YES___ NO___

APPLICANT (LEGAL NAME OF BUSINESS) _____ COMPANY TYPE (SOLE PROP, CORP. LLC, etc) **REQUIRED**

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____ www. _____ WEBSITE ADDRESS _____

FIELD OWNER/OPERATOR _____ CELL PHONE _____ BUSINESS PHONE _____ HOME PHONE _____

PHYSICAL ADDRESS of FACILITY _____ CITY _____ STATE _____ ZIP _____ E-MAIL ADDRESS _____

Airsoft Field Management Experience (Required)

Have you, your partners, or your employees ever **owned, operated, managed, or refereed** at any airsoft or paintball field (including scenario games and tournaments)? Please complete for each individual.

Individual Name	Name of Facility where experience gained	Title Held (Owner, Mgr, Ref)	Years of Experience	Total no. of Games Refereed or Supervised (50+ 100+ 250+ 500+)

1. What year did you start your airsoft business? _____
2. Is this your first airsoft field insurance policy? Yes___ No___
3. Do you have any other insurance policies covering this business (fire & theft, etc)? Yes___ No___
4. Do you own or operate a retail airsoft business (including internet sales, retail stores, store fronts, etc) at any other location under the same business name? Yes___ No___ If yes, describe: _____
5. Is any airsoft equipment rented from your store or field location for off-site use? Yes___ No___
6. Are there any services or activities on the premises other than airsoft? Yes___ No___
7. If yes, describe: _____
(Proof of insurance coverage must be submitted with your application for any services or activities other than airsoft operating under the same business entity for this or any other location.)
8. Do you operate an airsoft field at any other location? Yes___ No___ (Diagrams are required for each location.)
9. Are safety signs posted at your facility? Yes___ No___ (Please clearly indicate their location on the field diagram.)
10. Have any incidents or losses occurred at this or any other airsoft/paintball facility you have owned or managed (whether a claim was made or not) within the past three years? Yes___ No___ If yes, loss runs from your previous insurance carrier(s) for the past three (3) years will be required with the application to obtain quotation.
11. Are daily safety briefings conducted for each player and is all equipment inspected prior to play? Yes___ No___

12. Are first aid supplies and a telephone maintained on the premises during operation? Yes___ No___
13. Do staging areas have posted safety rules and are they supervised at all times by employees? Yes___ No___
14. Are there any climbing structures (4' or higher) in the area of play? Yes___ No___ If yes, photographs or detailed drawings of each structure (tower, castle, etc) are required. Are standard steps or ramps and handrails used for all climbing structures? Yes___ No___ Grip tape on the ramps and/or steps? Yes___ No___ (Ladders are prohibited.)
15. Is alcohol sold or permitted at this site? Yes___ No___ If yes, please provide the rules regarding consumption for approval at your facility.
16. Are the airsoft areas of play clearly marked off with caution tape, rope, etc at your airsoft field? Yes___ No___
17. Are players required to wear industry-approved safety goggles at **all times** during play, in the staging areas, and in the chronograph area? Yes___ No___
18. Are spectators allowed on the premises? Yes___ No___ Are spectators required to wear industry-approved safety goggles? Yes___ No___ If no, please indicate clearly on the diagram the location of the spectator area(s).
19. Number of working chronographs? ___ Are all airsoft guns chronographed prior to each game? Yes___ No___
20. Maximum velocity allowed for .20 BBs? Indoor _____(fps) Outdoor _____(fps)
21. Maximum velocity allowed for .25 BBs? Indoor _____(fps) Outdoor _____(fps)
22. Maximum velocity allowed for **SNIPERS** (100 feet from target) for .20 BBs? _____ for .25 BBs? _____
23. Are all participants (players) required to sign waivers? Yes___ No___
24. Are parents and/or legal guardians required to sign waivers on behalf of **all minors** (under 18)? Yes___ No___
25. What is the minimum age requirement for your lead/head referees? Minimum age for assistant referees?
26. What ratio of referees to players do you enforce at your facility? One referee for every _____ players (ages 13 and below). One referee for every _____ players (ages 14 and above).
27. What is the minimum age requirement to play airsoft at your facility? Regular Play ___ Private Games ___
28. Do you have any motorized vehicles (including tanks) that are used at your field during play? Yes___ No___
29. Do you have any "Off Premise Events" scheduled for this coming year? Yes___ No___ If yes, a complete off-premise event application must be submitted with this application, including the date and event location.
30. Check mark if allowed at your facility: Pyrotechnics?___ Grenades?___ Mines?___ Nerf Rockets?___
31. Are players required to use barrel blocking devices in all non-play areas at your facility? Yes___ No___
32. Check mark if you provide any of the following at your facility: Equipment repairs?___ Upgrades?___ Modifications?___
33. Is any equipment rented out of this facility for off-site use? Yes___ No___
34. How did you hear about us? Internet___ Magazine___ Agent___ Field operator___ Other: _____
35. Do you own or lease the premises? Own___ Lease___ If leased, the following information is also required:

Landlord/Additional Insured (Required for "Additional Insured" Certificates of Insurance)

Name of Land Owner	Complete Address	Insurable Interest (Landlord)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Exposures... Annual Airsoft Business Receipts (REQUIRED)

Total Annual Field Participants (Example): If a player signs a waiver and visits your facility 50 times during the policy period or year, this would equal 50 participants. Total Annual Projected Participants? _____ -- _____

Total Annual Field Receipts (field fees/rentals)? \$ _____ Retail/Pro-Shop (equipment sales, food & drink, and airsoft supplies)? \$ _____ Equipment Repairs? \$ _____ Other Non-Airsoft Receipts \$ _____

Prior Airsoft Insurance Warranty Statement (Required Unless New Business)

As requested, this information is to verify my previous insurance coverage and any and all losses/claims that I have been notified about or should have knowledge of. I understand that this information is a warranty statement and made part of my application for insurance coverage. Loss runs will be required if any claims or losses are reported. Warning: it is a fraudulent act to misrepresent prior claims.

Year	Name of Insurance Company	Premium	# of Claims/Injuries	\$ Losses Paid

Outdoor Facility

Number of acres? ____ Number of fields? ____ Is property fenced? Yes ____ No ____

Are no trespassing signs posted? Yes ____ No ____

Are night games held? Yes ____ No ____ If yes, is stadium-type lighting used? Yes ____ No ____

Are scenario night games held? Yes ____ No ____ Is overnight camping allowed? Yes ____ No ____

Are there any of the following physical hazards (natural or manmade) in or near the field of play?

Fox Holes/Trenches? ____ Tunnels? ____ Cliffs/Overhangs? ____ Ravines ____ Deep or fast moving water? ____

Sharp Rocks? ____ Protruding nails or spikes? ____ How often is your field inspected for hazards? ____

Describe frequency and manner of maintenance performed at your field:

Indoor Facility

Square feet of building? _____ Age of building? _____ Number of stories? ____ Square feet of play area? _____

Is your business located on the ground floor? Yes ____ No ____ Does it have fire alarms? Yes ____ No ____

Sprinklers? Yes ____ No ____ Type of Floor Surface: Concrete ____ Dirt ____ Wood ____ Other _____

A separate insurance policy for participant medical coverage is required, and will be quoted along with the general liability insurance policy.

THIS IS NOT A BINDER OF COVERAGE. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.

The applicant declares that to the best of their knowledge the information contained in the application is true and that no material facts have been suppressed or misstated. The applicant understands that incorrect or incomplete statements of information could void their protection. Any person who knowingly and with the intent to defraud any insurance company or other person, files an application for insurance containing false information, or conceals, for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act.

Signature of Applicant

Date

Signature of Agent

Date



AIRSOFT SAFETY RULES for FIELD OPERATORS

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1. FIELD OPERATION: Strict control must be exercised over all areas including: Field Entrance, Parking Areas, Staging Areas, Sales and Service Areas, Spectator Areas, and Playing Fields.
2. PERSONNEL: All field staff must be fully and properly trained. Referees must be sixteen (16) years of age or older.
3. EMERGENCY PROCEDURE: All field staff must be trained to properly respond in the event of an accident or emergency and instructed to respond immediately. Field staff must know the exact location of the field telephone, readily accessible first aid kit, and incident report forms.
4. FIELD ORIENTATION: Prior to the first game, each player must undergo a formal orientation session including a detailed explanation of the player safety rules, clearly specifying those rules which would result in player ejection, game rules, field layout, and emergency procedures. A referee will be assigned to each group at this time.
5. **ALL AIRSOFT GUNS MUST BE MAGAZINE FREE IN NEUTRAL (NON-PLAY) AREAS AND A BARREL BLOCKING DEVICE MUST BE USED. SAFETIES SHOULD BE ENGAGED WHEN NOT PLAYING.**
6. SAFETY GOGGLES and HEAD PROTECTION: Mandatory goggle enforcement is required in all areas where "Goggles On" signs are posted. Industry approved FULL FACE PAINTBALL OR AIRSOFT INDUSTRY APPROVED MASK GOGGLESYSTEMS ARE REQUIRED. Goggle Systems must meet or exceed ASTM guidelines. Modifications are prohibited. Wash, disinfect, and inspect goggles regularly. In addition, each player's ears, nose, and mouth should be covered (i.e. bandana or balaclava) to prevent penetration of BBs.
7. MINORS: Special precautions should be taken with players under age 18. NO MINORS UNDER THE AGE OF TWELVE (12) ARE ALLOWED. MINORS AGE TWELVE TO FOURTEEN (12-14) MUST HAVE AN ADULT PLAY WITH THEM. ALL MINORS MUST HAVE COMPLETE HEAD PROTECTION COVERING THE MOUTH, EARS, NOSE AND OTHER SOFT TISSUE.
8. CHRONOGRAPHING PROCEDURES: Maintain at least one chronograph with a back up battery at the field at all times. All airsoft Markers must be chronographed before players enter the field and before each new set of games. A chronograph referee must be available at all times to strictly enforce velocity guidelines.
9. MAXIMUM VELOCITIES:
 - Maximum Velocity allowed for .20 BBs (Full Auto) - Close Quarter and Indoor 300 fps, Outdoor 400 fps
 - Maximum Velocity allowed for .20 BBs (NO FULL AUTO) - Close Quarter and Indoor 350 fps, Outdoor 400 fps
 - Maximum Velocity allowed for .25 BBs (Full Auto) - Outdoor only 350 fps, NO FULL AUTO .25 BBs Indoor
 - Maximum Velocity allowed for .25 BBs (NO FULL AUTO) - Close Quarter and Indoor 350 fps
 - Underwriter approval is required for "Sniper" velocities over 400 fps, NO FULL AUTO Sniper weapons allowed.
10. FIELD MAINTAINENCE: Boundaries at all outdoor playing fields must be clearly and continuously marked with rope, tape, or other highly visible material. The field must be inspected frequently for natural or man-made hazards. Airsoft guns must be cleaned and inspected weekly. A designated staff member must inspect the chronograph, first aid kit, mobile telephone, safety signs, and all field equipment daily.
11. PLAYER SAFETY RULES: Each game participant must read and sign the airsoft rules prior to signing the waiver of liability. The player safety rules must be posted at the field entrance and in the registration area. Immediate mandatory ejection of any player who knowingly violates any safety rules is required.
12. SAFETY SIGNS: 'Goggles On" signs must be posted at every active playing field entrance. "Barrel Blocked" signs must be posted at every playing field exit. "Caution Airsoft Game Area" signs must be posted at every location where non-participants might be expected to directly approach the playing field.
13. NO PHYSICAL CONTACT: No physical contact such as holding, grappling, or simulated knife/bayonet contact is permitted.
14. SPECTATORS: Any spectators who might be in a position where they could be shot must wear appropriate eye protection.

To be accepted as a member of this insurance program, I understand and agree to abide by the terms of the Field Safety Requirements. I realize that failure to comply with these terms may result in termination of membership and associated benefits, including insurance.

OWNERS SIGNATURE

BUSINESS NAME

DATE



Field Diagram Supplement

(Required for each Playing Location)

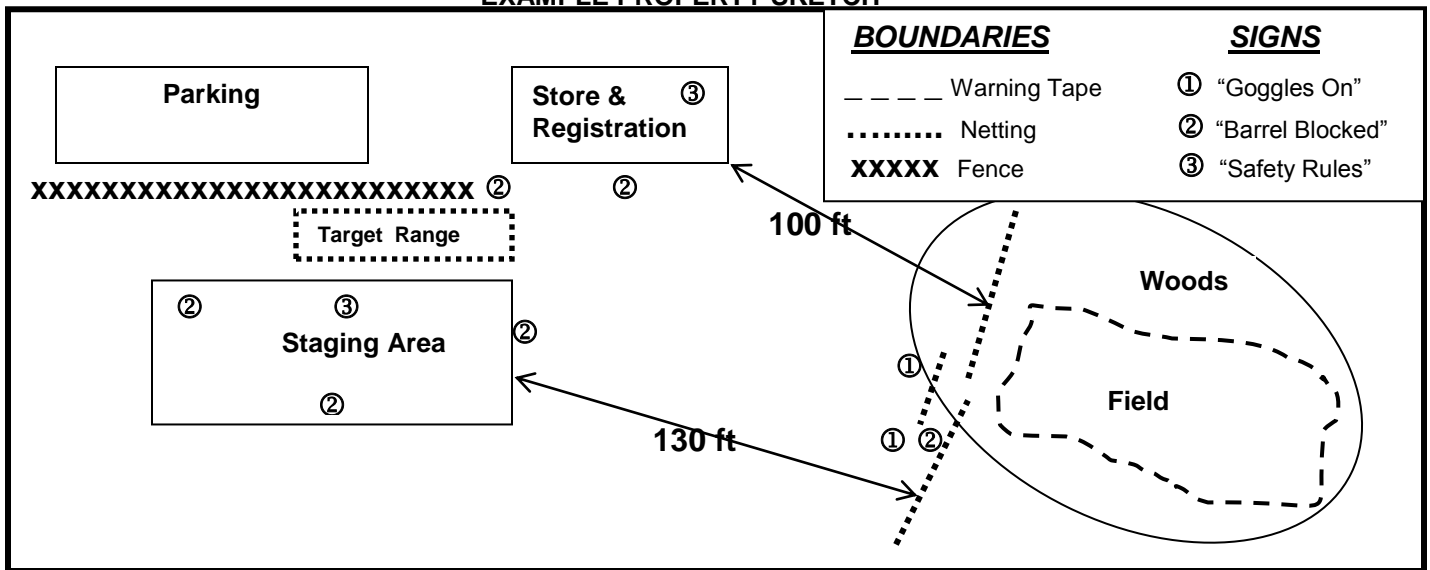
A rough sketch of the property is required, showing playing fields and other details. If you have more than one location, please complete a separate diagram for each location. You must clearly show the parking area, spectator area, pro shop, chronograph area, target range, player staging area, netting and/or caution tape marking the entire field(s) of play, safety signs, and **you must show distances between playing fields and non-play areas.**

Field Name: _____

Physical Address: _____

Name and Address of Landlord/Additional Insured: _____

EXAMPLE PROPERTY SKETCH



Use additional pages if necessary