

AgriBusiness® Division – Equine Farm Center



CAMP SUPPLEMENT

If none, check here.

Named Insured: _____

Policy No. _____

1. What are the main camp activities? _____
i.e. basic horse skills such as grooming, braiding or more advanced with instruction etc.
2. The camp is operated from _____/_____/_____ to _____/_____/_____.
Month Day Month Day
3. Camp Receipts \$ _____
4. Number of campers per day _____ per week _____.
5. Ages of campers? _____.
6. Are there any campers who are physically or emotionally handicapped? Yes No
7. The hours of the camp are from _____ am/pm to _____ am/pm and _____ days per week.
8. Are overnight accommodations provided? Yes No
 - Type: room, cabin, tent etc. _____.
 - Excluding tents - do all structures used for sleeping quarters have working smoke detectors? Yes No
9. Are meals prepared and/or provided by you? Yes No
10. Number of adult supervisors? _____
11. There are _____ supervisors under the age of 18.
12. What are the ages of the counselors? _____.
 - What type of training do they receive? _____.
13. Is or has any camp counselor/employee/supervisor been under or currently under investigation for, or have a previous record of, child abuse? Yes No
14. How are medications kept and distributed to children with prescription/non-prescription needs?

15. Are campers are under adult supervision at all times? Yes No
 - If children are not in the direct vision of adults, are adults aware of where they are and what they are doing? Yes No

16. Are all buildings and equipment maintained in a safe, clean condition and in good repair, with indoor and outdoor environments safe, clean and spacious? Yes No

17. Is there a swimming pool? Yes No

If the answer is yes, answer the following.

*Is the pool fenced? Yes No

*Is there a diving board? Yes No

*What is the pool depth? _____

*Is there a lifeguard on duty? Yes No

18. What type of certification is required of the lifeguard? _____

19. Are swimming lessons given? Yes No

20. What type of certification is required of the instructor? _____

21. How many fire extinguishers are in the buildings in which the campers will be conducting activities?

_____.

22. Are all poisonous/toxic materials kept under lock and key and out of children's reach? Yes No

23. Are there any off premises activities? Yes N

If yes, describe activities in detail _____

19. Do you provide transportation to campers for any reason? Yes No

If yes, we will require a COI from your auto carrier and complete driver information of all drivers.

*If parent volunteers are used to transport - we will need the same COI and driver information.

*If you provide transportation by a means other than above we will need details – i.e. chartered bus, etc.

Comments:

Please provide any additional information that you feel may be helpful in our review of this exposure.
