



Airsoft Field General Liability Insurance Application

Legal Business Name: _____

DBA (if any): _____ Field Owner/Operator: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Physical Address: _____ City: _____ State: _____ Zip: _____

Business Phone: _____ Fax: _____ Mobile: _____

Email: _____ Website: _____

Status: _____ Individual _____ Partnership _____ Corporation _____ S Corp _____ Not for Profit _____ Other

Proposed Effective Date (Required): ____/____/____ Currently Insured? _____ Yes _____ No

FEIN: _____ Number of Employees: _____ Is Location within City Limits? _____ Yes _____ No

1. Have you, your partners, or your employees ever owned, operated, managed or refereed at any airsoft or paintball field (including scenario games and/or paintball tournaments): _____ Yes _____ No

Please list a minimum of (2) staff members in the management experience chart below:

Individual Name	Name of Facility Where Experience Gained	Title Held (Owner, Mgr, Ref)	Years of Experience	Total # of Games Supervised/Refereed
<i>Example: Jack Black</i>	<i>Black's Airsoft Club</i>	<i>Referee</i>	<i>8</i>	<i>500+</i>

2. Is this your first airsoft field insurance policy? _____ Yes _____ No

Do you have any other insurance policies covering this business (property, etc.)? _____ Yes _____ No

Does the applicant own or operate a retail airsoft business (including internet sales, retail stores, store fronts, etc.) at this or any other location under the same business entity? _____ Yes _____ No

If yes, please describe: _____

3. Is any equipment rented out of your field pro-shop or retail store (off-site and unsupervised)? _____ Yes _____ No

4. Are there any services or activities on the premises other than airsoft? _____ Yes _____ No

If yes, please describe: _____

(Proof of insurance coverage must be submitted with your application for any services other than airsoft operating under the same business entity for this or any other location.)

5. Do you operate an airsoft field at any other location? _____ Yes _____ No

6. Are safety signs posted at your facility? _____ Yes _____ No

7. Are daily safety briefings conducted for each player? _____ Yes _____ No

8. Are first aid supplies and a telephone maintained on the premises during operation? Yes No
9. Do staging areas have posted safety rules? Yes No
Is the staging area supervised at all times by employees? Yes No
10. Are there any climbing structures 4' or higher in the marked area of play? Yes No
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.
11. Is alcohol sold or permitted at this site? Yes No
If yes, submit your rules regarding consumption for approval at your facility: _____
-
12. Are the airsoft areas of play clearly marked off with caution tape, rope, etc. at your field? Yes No
13. Are players required to wear full-face industry-approved safety goggles, shemaghs, or balaclavas at all times during play, and in the chronograph area? Yes No
If no, please list your requirements: _____
14. Are spectators allowed on the premises? Yes No
Are spectators required to wear full-face industry-approved safety goggles? Yes No
15. Number of working chronographs? _____
Are all airsoft guns chronographed prior to each game? Yes No
16. Maximum velocity allowed for .20 BBs? Indoor: _____ (fps) Outdoor: _____ (fps)
17. Maximum velocity allowed for .25 BBs? Indoor: _____ (fps) Outdoor: _____ (fps)
18. Maximum Velocity allowed for Snipers (100 feet from target) for .20 BBs _____ for .25 BBs _____
19. Are all participants required to sign Waivers? Yes No
Are parents or legal guardians required to sign Waivers on behalf of all minors (under 18)? Yes No
20. What is the minimum age requirement for your lead/head referee? _____
21. What ratio of players to referees do you enforce at your facility? One referee for every _____ players.
22. What is the minimum age requirement to play airsoft at your facility? Regular Play _____ Private Games _____
23. Do you have any motorized vehicles (including tanks) that are used at your field during play? Yes No
24. Do you host off-premise events? Yes No
25. Are the following allowed at your facility (Y/N): _____ Pyrotechnics _____ Mines/Grenades containing explosives
26. Are players required to use barrel blocking devices in all non-play areas at your facility? Yes No
27. Do you perform any of the following at your facility (Y/N): _____ Gun Repairs _____ Gun Upgrades _____ Modifications
28. How did you hear about us? _____ Magazine _____ Internet _____ Agent _____ Field Operator _____ Other
29. Do you own or lease the premises? _____ Lease _____ Own If leased, the following information is **required**:

Name of Land Owner	Complete Address	Insurable Interest (i.e. Landlord/Property Owner)

EXPOSURES – Annual Airsoft Business Receipts (required)

30. Total Annual Field Participants? _____
Example: If a player signs a Waiver and visits your facility 25 times during the policy period or year, he is considered 25 player days or participants.
31. Total Annual Field Receipts (field fees/rentals): \$ _____
Total Annual Retail/Pro-Shop Receipts (equipment sales, food & drink, airsoft supplies): \$ _____
Customer equipment repair service charges and fees: \$ _____
Other non-airsoft receipts: \$ _____
Operating Season: _____ to _____ (example: March to November)

PREVIOUS INSURANCE COVERAGE:

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

Five year Loss Run History is required for this business, unless it is a new facility not previously insured. If Loss Run History is not available and there have been no reported losses, a signed Statement of No Loss is required.

32. Have you ever had your insurance cancelled or non-renewed for any reason? Yes No
 If yes, please describe: _____
33. Have you ever filed for bankruptcy? Yes No
34. Does any volunteer, owner, coach, or official have a criminal record? Yes No
35. Do you hire Concessionaires, Independent Contractors or Subcontractors? Yes No
 If yes, for what activities or duties: _____
 If yes, we require proof of insurance coverage listing your business as Additional Insured.
36. Do you provide on-the-job training or tryouts for your referees? Yes No
 If no, please list your method of training: _____
37. Do you require background checks on all of your employees? Yes No
 If no, do you require background checks on all employees working with minors? Yes No
38. Are employees cross-checked on the National Sex Offender Registry? Yes No
39. Is there at least one employee on duty at all times that is CPR certified? Yes No
40. Please complete the Outdoor and/or Indoor facility questions listed below:

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 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 man-made) in or near the field of play:
- | | | | |
|----------------------------|--|---------------------------|--|
| Fox Holes/Trenches | <input type="checkbox"/> Yes <input type="checkbox"/> No | Tunnels | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Cliffs/Overhangs | <input type="checkbox"/> Yes <input type="checkbox"/> No | Ravines | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Sharp Rocks | <input type="checkbox"/> Yes <input type="checkbox"/> No | Deep or fast moving water | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Protruding Nails or Spikes | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
- How often is your field inspected for hazards: _____
- Describe 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 only? Yes No
- Does it have fire alarms? Yes No Does it have sprinklers? Yes No
- What type of floor surface do you have? Carpet Dirt Concrete Other _____
- What floor covering do you have over the surface? Carpet Dirt/Sand/Sawdust Mix Other _____
- How many inches of covering do you have? _____ (If dirt/sawdust mix, 6-8" is recommended.)

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 this application is true and that no material facts have been suppressed or mis-stated. 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

Send completed form to:

Specialty Insurance LLC
 3620 Pelham Road #383, Greenville, SC 29615
 Phone: (888) 673-7228 Fax: (864) 458-8371
 Email: cturner@specialtyinsurancesc.com or bobbysharp@specialtyinsurancesc.com

AIRSOFT FIELD OPERATOR SAFETY REQUIREMENTS

- FIELD OPERATION:** Strict control must be exercised over all areas, including:
(A) Field Entrance (B) Parking Areas (C) Staging Areas (D) Sales and Service Areas (E) Spectator Areas (F) Playing Fields
- PERSONNEL:** All field staff must be fully and properly trained. Referees and fill station attendants must be sixteen (16) years of age or older. Head referees must be eighteen (18) years of age or older.
- 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. Management must fill out and return an incident form immediately following all injuries.
- FIELD ORIENTATION:** Prior to the first game, each player must undergo a formal orientation session including: a detailed explanation of the player safety rules; game rules; the geographical diagram of the field; and emergency procedures. Referees are assigned to each group at this time.
- ALL AIRSOFT GUNS MUST BE MAGAZINE FREE IN NEUTRAL (NON-PLAY) AREAS AND A BARRELL BLOCKING DEVICE MUST BE USED. SAFETYS MUST BE ENGAGED WHEN NOT PLAYING.**
- SAFETY GOGGLES:** Full face protection must be work by anyone in the playing field, staging area and chronograph station at all times. **NO EXCEPTIONS.** Acceptable full face protection is as follows: Any Airsoft or Paintball goggle mask that meets or exceeds ASTM STANDARDS and is manufactured for the sport of Airsoft or Paintball. These masks cannot be altered from their original manufactured form. Eyes, Face, Ears, Nose, Mouth and Cheeks must be fully covered and protected. Half Balaclavas are allowed with industry approved Airsoft goggles. Shemaghs are allowed with industry approved Airsoft goggles.
- MINIMUM AGE:** Players must be ten (10) years of age or older to play Airsoft, unless in a private party or accompanied by a playing adult, then the minimum age is eight (8) years of age or older.
- CHRONOGRAPHING PROCEDURES:** Maintain at least one (1) chronograph (preferably two) with a back-up battery at the field at all times. All Airsoft guns 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.
- MAXIMUM VELOCITIES:**
(MED) = Minimum Engagement Distance

0.20 BB	0.25 BB	Outdoor Field MED	Indoor Field MED	Recommended Fire Mode
300 FPS	270 FPS	5 feet	5 feet	All
350 FPS	310 FPS	10 feet	5 feet	All Outdoor / Semi-Auto Indoor
400 FPS	350 FPS	20 feet	10 feet	All Outdoor / Semi-Auto Indoor
500 FPS	450 FPS	100 feet	100 feet	Semi-Auto or Bolt Action Only
550 FPS	500 FPS	100 feet	100 feet	Bolt Action Only
500 FPS	500 FPS	100 feet (Sniper)	100 feet	Semi-Auto or Bolt Action Only

FULL AUTO IS PROHIBITED.
- FIELD MAINTENANCE:** Boundaries of 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, and all field equipment (including safety signs) daily.
- PLAYER SAFETY RULES:** Each player/participant must read the Player Safety Rules prior to signing the Waiver of Liability. The Player Safety Rules must be posted at the field entrance and counter/sales office. Mandatory ejection (without warning!) of any player that knowingly violates the required safety rules is required.
- SAFETY SIGNS:** "Goggles On" signs must be posted at every entrance to active play areas. "Magazine Free" signs must be posted at every exit of active play areas. "Caution Airsoft Game Area" signs must be posted at any location where the operator/field manager might expect unauthorized direct access to the active playing field by non-participants.
- NO PHYSICAL CONTACT:** No physical contact such as holding, grappling, simulated knife or bayonet contact is allowed.
- SPECTATORS:** Any spectators within any conceivable distance of being shot should have appropriate eye protection.