

TOUR OPERATORS SUPPLEMENTAL APPLICATION

- 1. Name of Applicant:
2. Does the Applicant operate, promote or sell its tours to travel agents, or other commercial operations?
3. Does the Applicant operate or travel to the Balkans, Belarus, Burma, Ivory Coast, Cuba, Liberia, Democratic Republic of the Congo, Iran, Iraq, North Korea, Sudan, Syria, or Zimbabwe?
4. Does the Applicant operate or travel outside of the United States?
5. Does the Applicant provide any of the following activities within their adventure tours?
6. Check all of the following loss control/risk management procedures that are currently used by your organization?
7. Does the applicant desire Hired and Non-Owned Auto Liability?
8. Has the Applicant or its members ever defaulted in any way on any kind of obligation to a carrier, conference, supplier, client or consumer?

NOTICE

I understand that the information submitted herein becomes a part of my professional liability application and is subject to the same warranty and conditions. Must be signed and dated by an Owner, Partner or Principal as duly authorized on behalf of the Applicant.

Signature of Owner, Partner or Principal Title Date