

Signature Golf Renewal Form

Name of Golf Club :	
Renewal Date:	Policy #:

1. Has the Management or Ownership changed in the past 12 months? Yes No
 If Yes, please explain: _____

2. Is your Club in the process of Audubon Certification? Yes No
 If Yes, please advise anticipated completion date: _____
3. Did you have any changes in operations in the past year? _____

4. Do you have any new market initiatives or construction planned in the next year? Yes No
 If Yes, please describe: _____

REVENUES - Annual Gross Revenues (please estimate the split):

Membership Dues	\$	
Green Fees/Driving Range	\$	
Golf Cart Rentals	\$	
Food Services	\$	
Liquor Revenue	\$	
Pro Shop Revenue	\$	
Banquet/Wedding Rentals	\$	
Curling Club	\$	
Other (describe) _____	\$	
Total Revenues	\$	

COVERAGES

1. Do you wish to purchase **Umbrella** coverage? Yes No
 Limit Required \$ _____

OTHER INFORMATION

1. Please provide updated values and limits required
2. Please provide updated list of loss payees and additional insured's

Date: _____ **Completed by:** _____

Brokerage: _____