

P.O. Box 650 • 57 Parker Rd. • Barre, VT 05641 • 800-548-4301 • www.neee.com

## CLUBS SUPPLEMENTAL (Complete in addition to ACORD Application)

BUSINESS INFORMATION	Prop	osed First Named Insu	red & Other Nai	med Insured(s):					
1. Indicate type of functions banquet room(s) are used for:   Fundraisers	Loca	tion Address	Street	City	County	State	ZIP Code		
Indicate type of functions banquet room(s) are used for:	BUS	INESS INFORMATION							
Fundraisers   Bingo Games   Business Meetings   Funeral Dinners   Sport Events   Anniversary Parties   Card Games   Benefit Dances   Wedding Receptions   Other (describe):   How often are facilities booked?   Yes   No   State   State	1.	Indicate primary function of club:							
Funeral Dinners   Sport Events   Anniversary Parties   Card Games   Benefit Dances   Wedding Receptions   Wedding Receptions   Other (describe):   How often are facilities booked?   Yes   No	2.	· · · · ·							
Card Games   Benefit Dances   Wedding Receptions     Other (describe):     How often are facilities booked?   Yes No     3. Is alcohol served?   // // // // // // // // // // // // /		☐ Fundraisers ☐ Bingo Games ☐ Business Meetings							
Other (describe):   How often are facilities booked?   How often are facilities booked?   How often are facilities booked?   If yes, complete Restaurant, Bar and Tavern Supplement, S369-IL.   Are club facilities available for private use?		☐ Funeral Dinners		Sport Events	☐ Anniversary P	arties			
How often are facilities booked?   Yes   No		☐ Card Games	□ E	Benefit Dances	☐ Wedding Rece	eptions			
Yes   No		Other (describe):							
3. Is alcohol served?  If yes, complete Restaurant, Bar and Tavern Supplement, S369-IL.  4. Are club facilities available for private use? If yes, are they available to members only?  5. Can entertainment be brought in by the booking party? If yes, type of entertainment: Indicate frequency entertainment is brought in by the booking party:  6. Any contests or tournaments? If yes, describe:  7. If rod or gun club, is there on-site practice? If yes, indicate location:  IMPORTANT NOTICE  DECLARATION  I DECLARE THAT THE STATEMENTS MADE IN THIS APPLICATION ARE COMPLETE AND TRUE.  As part of our underwriting procedures, a routine inquiry may be made to obtain applicable information concerning character, general reputation, and credit history. Upon your written request, additional information as to the nature and scope of the report, if one is made, will be provided.  SIGNATURES  Applicant Signature  Title  Date		How often are facilities booked?							
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Producer Signature Date	SIGN	NATURES							
	Applicant Signature			Tit	Date				
Agent Name and Address	Producer Signature Da						te		
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	Agent	Name and Address				•			