



## Hole in One Contest Application

Please note:

- Questions marked in **bold** are required.
- Complete the application as fully as possible to ensure an accurate quote.
- If you have any questions please contact our offices at (804) 754-7610.

### GENERAL INFORMATION

**Named Insured:** \_\_\_\_\_

**Applicant's name:** \_\_\_\_\_

**Street address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

### LIABILITY INFORMATION

**Amount of Coverage Desired:** \_\_\_\_\_

**Coverage From:** \_\_\_\_\_ **to** \_\_\_\_\_

### ATTRACTION INFORMATION

**Name of Course:** \_\_\_\_\_

**Street address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Hole(s) to be covered:** \_\_\_\_\_ **Total length (yards):** \_\_\_\_\_ **Total par:** \_\_\_\_\_

Number of Holes-in-one on the Covered Hole(s) in the last 5 years: \_\_\_\_\_

**Number of Amateur Players:** \_\_\_\_\_ **Number of Professional Players:** \_\_\_\_\_

#### FRAUD STATEMENT

Any person who knowingly and with intent to defraud any insurance company or other person, files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

#### WARRANTY STATEMENT

1. The Hole-in-One must occur during official tournament play.
2. No practice shots shall be permitted and all shots shall be made in the regular round of tournament play.
3. Two Tournament Committee appointed observers shall be stationed at the selected target hole(s) at all times during the tournament. One at the tee and the other at the green.
4. The target hole(s) will measure from teeing ground to flagstick no less than the specified yardage. Only one pre-designated hole may be used on the target hole green.
5. The Hole-in-One must occur by an official registered competitor.
6. The following documentation will be furnished to the Insurance Company as proof of a Hole-in-One claim:
  - (a) Attached statements by the two target hole observers (described in #1 above), the successful competitor (ACE-maker), and one playing partner.
  - (b) A signed and completed scorecard of the ACE-maker (photo copies accepted).
  - (c) Certified copy of Tournament Pairing Sheet by the golf course professional or tournament director supervising the tournament.
7. The policy premium together with a signed or accepted application are the basis of this insurance and must be received or postmarked prior to the start of the tournament.

**Any policy issued will be based upon the above information and will be considered as warranties in the policy.**

**Name of Applicant:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**FOR BROKER USE ONLY**

Name of Authorized Agent or Broker: \_\_\_\_\_

Name of Agency: \_\_\_\_\_

Agency Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail address: \_\_\_\_\_