

Application for Skill-Based Prize Insurance

Instructions On Completing This Form:

The Applicant(s) must give a fair presentation of the risk to be insured by disclosing all material matters or circumstances which the Applicant(s) knows or ought to know. A matter is material if it would influence the judgement of a prudent underwriter as to whether to accept the risk, or the terms of the insurance (including premium). For these purposes, the Applicant(s) knows material matters which are known to its senior management, or anybody responsible for arranging its insurance. The Applicant(s) also knows material matters which should reasonably have been revealed by a reasonable search of information available to it, which includes information held by third parties. The Applicant(s) should therefore conduct a reasonable search of such information. The Applicant(s) must disclose all material matters and circumstances known to it in a reasonably clear and accessible way, whether or not they are the subject of a specific question in this Application Form and any appendices ('Application Form').

Please answer all questions fully and tick all relevant boxes. If there is insufficient space provided to answer questions fully or if there are any material matters or circumstances not specifically covered by a question in this Application Form, they must be listed on a separate sheet of paper which must be signed, dated and attached.

Where there is reference to a defined term in this Application Form these are outlined in full in the applicable Contract of Insurance wording.

For further details or if there is any doubt as to what facts or circumstances should be disclosed, the Applicant(s) should contact their insurance broker.

Upon completion, please sign and return this form to your Insured Creativity representative or to info@insuredcreativity.com and include the following where applicable:

- Contest Terms and Conditions

We strongly urge that you retain a copy of this proposal.

Please approach us with any questions you may have. We look forward to working with you.

Please complete the following:

Broker Information:

| | | | |
|----------------------|--|-------------------------|--|
| Contact Name: | | | |
| Company: | | | |
| Address: | | | |
| City: | | State/Province: | |
| Country: | | Postal Code/Zip: | |
| Telephone: | | Email: | |

Insured Information:

| | | | |
|----------------------|--|-------------------------|--|
| Contact Name: | | | |
| Company: | | | |
| Address: | | | |
| City: | | State/Province: | |
| Country: | | Postal Code/Zip: | |
| Telephone: | | Email: | |

Event Information:

| | | | |
|--------------------------|--|-------------------------|--|
| Event Name: | | | |
| Event Start Date: | | Event End Date: | |
| Venue Name: | | | |
| Address: | | | |
| City: | | Province/State: | |
| Country: | | Postal Code/Zip: | |

What type of Skill-Based Prize challenge would you like to offer a prize award for?

Baseball

Successfully throw the baseball from the distance below through the target for the chance to win.

| Select distance: | Throw Distance | Number of attempts | Insured Prize Value |
|--------------------------|----------------|--------------------|---------------------|
| <input type="checkbox"/> | 60 feet | | |

Basketball

Successfully shoot the basketball from the distance(s) below through the net for the chance to win.

| Select distance: | Basketball Shot(s) | Number of attempts | Insured Prize Value |
|--------------------------|---|--------------------|---------------------|
| <input type="checkbox"/> | Half-Court Shot | | |
| <input type="checkbox"/> | Far Foul Line Shot (3/4 Court) | | |
| <input type="checkbox"/> | Full Court Shot (far baseline 91.5 feet) | | |
| <input type="checkbox"/> | Free Throw and Three Points and Half Court and Full Court | | |
| <input type="checkbox"/> | Lay Up and Free Throw and Three Points and Half Court | | |

Curling Draw to the Button

Successfully get the rock into the center of button from the distance below for the chance to win.

| Select distance: | Distance from the Button | Number of attempts | Insured Prize Value |
|--------------------------|--------------------------|--------------------|---------------------|
| <input type="checkbox"/> | 93 feet | | |

Golf Putt

Successfully putt the golf ball from the distance below into the target hole for the chance to win.

| Select distance: | Putt Distance | Number of attempts | Insured Prize Value |
|--------------------------|---------------|--------------------|---------------------|
| <input type="checkbox"/> | 60 feet | | |

Hockey Scoro

Successfully shoot the puck from the distance below through the target over the net for the chance to win.

| Select distance: | Distance from the Net | Number of attempts | Insured Prize Value |
|--------------------------|--------------------------|--------------------|---------------------|
| <input type="checkbox"/> | 60 feet (near blue line) | | |
| <input type="checkbox"/> | 90 feet (center ice) | | |
| <input type="checkbox"/> | 120 feet (far blue line) | | |

Hole-In-One

Successfully achieve a hole-in-one on the Target Hole for the chance to win.

| | | | | |
|--|--|--------------------------------|-----------------|-------------------------------------|
| Insured Prize Value: | | | | |
| Insured Par 3 Hole Number: | | | | |
| Number of Prize Reinstatements: | Reinstatements restore the prize value should there be an earlier successful attempt during the Event. Reinstatements do not apply to eligible participants who have already attempted the Insured Hole. | | | |
| Amateur Participant Details: | Participants | Number of Participants: | Yardage: | Number of attempts in total: |
| | Men: | | | |
| | Women: | | | |
| | Professionals: | | | |
| Has the Insured run this event in the past: | <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please provide details: | | | |
| Has the Insured had any hole-in-one claims in the past: | <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please provide details: | | | |

North American Football Kick

Successfully kick the football from the distance below through the target for a chance to win.

| Select distance: | Kick From | Number of attempts | Insured Prize Value |
|--------------------------|-----------|--------------------|---------------------|
| <input type="checkbox"/> | 40 yards | | |
| <input type="checkbox"/> | 45 yards | | |
| <input type="checkbox"/> | 50 yards | | |

North American Football Throw

Successfully throw the football from the distance below through the target for a chance to win.

| Select distance: | Throw From | Number of attempts | Insured Prize Value |
|--------------------------|------------|--------------------|---------------------|
| <input type="checkbox"/> | 30 yards | | |

Soccer Kick (European Football)

Successfully kick the soccer ball from the distance below through the target for a chance to win.

| Select distance: | Kick From | Number of attempts | Insured Prize Value |
|--------------------------|-----------|--------------------|---------------------|
| <input type="checkbox"/> | 35 yards | | |

Other Program Details:

Please define any further details about your promotion and/or event that have not been outlined above:

DECLARATION:

I/we confirm that the information given in this Application Form including any attachment(s) provided to support this Application, whether in my/our own hand or not, is correct.

I/we declare that I/we have made a fair presentation of the risk by disclosing all material matters and circumstances which would influence a prudent underwriter’s assessment of the risk which we know or ought to know including my/our senior management or anybody responsible for arranging my/our insurance, having conducted a reasonable search of the information available to me/us (including information held by third parties) in order to reveal those facts and circumstances. Failing that, I/we have given Underwriters sufficient information to put a prudent Underwriter on notice that it needs to make further enquiries in order to reveal material matters or circumstances, whether or not those matters, and circumstances were the subject of a specific question in this Application Form. If there are any material matters or circumstances not specifically covered by a question in this Application Form, I/we have listed these on a separate sheet of paper which is signed and dated and attached. I/we the Applicant(s) accept these conditions as the proposed Insured or agent of the proposed Insured.

It is understood that the signing of this Application Form does not bind the Applicant(s) to complete or Underwriters to accept this insurance.

I/we the Applicant(s) also agree that in the event any information contained in any completed Application Form and/or supplied to support this Application Form or other application for this insurance changes or becomes incorrect such as to constitute a material alteration to the risk prior to the inception date of the insurance, I/we will advise Underwriters in writing immediately on becoming aware of such changes. In such circumstances, Underwriters will be entitled to re-assess the Application for insurance, including but not limited to withdrawing any prior agreement to provide cover.

The person signing this Application Form is duly authorized to do so on behalf of the Applicant(s).

By submitting this application, I/we consent to the collection, use and disclosure of personal information as defined in our Privacy Policy found on Insured Creativity Inc.’s website.

Generally, information is collected and stored for the following purposes:

- the communication with Lloyd’s policyholders
- the underwriting of policies
- the evaluation of claims
- the analysis of business results
- purposes required or authorized by law

For the purposes identified, personal information may be disclosed to Lloyd’s related or affiliated organizations or companies, their agents, and to certain non-related or unaffiliated organizations or companies, including service providers. These entities may be located outside Canada therefore a customer’s information may be processed in a foreign jurisdiction and their information may be accessible to law enforcement and national security authorities of that jurisdiction.

Signing this proposal form does not bind the Client to complete this insurance and is subject to acceptance by both parties.

| | | | |
|-------------------|--|------------------|--|
| Signature: | | Date: | |
| Name: | | Position: | |