



# Gold's Gym Insurance Application

Effective Date: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_  
 Legal Business Name: \_\_\_\_\_  
 Year Business Started: \_\_\_\_\_ Experience in Industry: \_\_\_\_\_  
 Location Address: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 Current Insurance Carrier: \_\_\_\_\_ Current Premium: \_\_\_\_\_

Estimated Annual Sales: \_\_\_\_\_  
 Number of Members: \_\_\_\_\_  
 Full-time Employees: \_\_\_\_\_ Part-time Employees \_\_\_\_\_  
 Club Hours: \_\_\_\_\_  
 Number of Tanning Beds: \_\_\_\_\_ Childcare: Y N  
 Boxing: Y N Martial Arts: Y N Massage: Y N  
 AED: Y N Camera System: Y N CrossFit: Y N  
 Silver Sneakers: Y N  
 # of Pools: \_\_\_\_\_ # of Whirlpools: \_\_\_\_\_  
 # of Saunas: \_\_\_\_\_ # of Steam Rooms: \_\_\_\_\_  
 Additional Amenities: \_\_\_\_\_  
 Leased Space: \_\_\_\_\_

Estimated Annual Payroll: \_\_\_\_\_  
 FEIN: \_\_\_\_\_  
 Percentage of Ownership:  
 Name \_\_\_\_\_ %  
 Name \_\_\_\_\_ %  
 Name \_\_\_\_\_ %  
 Name \_\_\_\_\_ %  
 Name \_\_\_\_\_ %

Rent  Own Square Footage: \_\_\_\_\_  
 Number of Stories: \_\_\_\_\_ Year Built: \_\_\_\_\_  
 Building Updates (complete for property older than 20 years):  
 Electrical: \_\_\_\_\_ Plumbing: \_\_\_\_\_ Roof: \_\_\_\_\_  
 Other Building Occupants:  
 Left: \_\_\_\_\_  
 Right: \_\_\_\_\_  
 Rear: \_\_\_\_\_  
 Central Alarm System: Y N Sprinklers: Y N  
 Club Located in:  Free standing building  
 Office complex  Shopping center  
 Construction:  Brick/Cinderblock  Concrete  
 Metal  Steel Frame  Wood Frame  
 Roof:  Concrete/Encased Steel  Steel Joisted  
 Wood Joisted  Other  
**Property Coverage – Replacement Cost Limits:**  
 Building: \_\_\_\_\_  
 HVAC System: \_\_\_\_\_  
 Tenant Improvements: \_\_\_\_\_  
 Business Personal Property: \_\_\_\_\_  
 Business Interruption: \_\_\_\_\_

Excess Liability Limit:  
 \$1,000,000  \$2,000,000  \$3,000,000  \$4,000,000  \$5,000,000

Employment Practices Liability Limit:  
 \$500,000  \$1,000,000

Please return application to Fitness Insurance:  
 info@fitnessinsurance.com - 720-279-8321 fax - 800-881-7130 phone  
 10333 East Dry Creek Road, Suite 250 - Englewood, Colorado 80112  
 dba Fitness Insurance Agency in MI, TX, NY, NC. CA License Number 0G00756.

