

Covers swim schools and learn-to-swim programs, including lessons at the applicant's pool, rented pools, and clients' home pools. Swim teams also complete CWCO-SUP-SPORTSLEAGUE. Complete with ACORD 125, 126, and 140.

1 APPLICANT / BUSINESS INFORMATION

LEGAL BUSINESS NAME	DBA	FEIN	YEARS IN BUSINESS
BUSINESS ADDRESS	CITY / STATE / ZIP	WEBSITE	
Entity type: ☐ Sole proprietor ☐ Partnership ☐ LLC ☐ Corporation			
PRIMARY CONTACT / TITLE	PHONE	EMAIL	
POOL OPERATOR CERTIFICATION	INSTRUCTORS (COUNT)		

2 OPERATIONS

STUDENTS PER WEEK	STUDENTS UNDER 5 (%)	MAX STUDENTS PER INSTRUCTOR	POOLS USED
2-1 Does the school give lessons in clients' home pools? ☐ Yes ☐ No			
IF YES, EXPLAIN			
2-2 Does the school use pools it doesn't own or operate? ☐ Yes ☐ No			
IF YES, EXPLAIN			
2-3 Does the school offer infant survival or parent-and-baby classes? ☐ Yes ☐ No			
IF YES, EXPLAIN			

3 EXPOSURE & RISK QUESTIONS — DROWNING PREVENTION & SUPERVISION

Drowning is the leading cause of death for young children in the U.S., and it is fast and silent. A dedicated lifeguard who isn't teaching, strict ratios, and constant watch over waiting children are the core defenses.

3-1 Is a certified lifeguard on duty whose only job is watching the water during every lesson? ☐ Yes ☐ No	
IF YES, EXPLAIN	
3-2 Are all instructors certified in water safety instruction and CPR/first aid? ☐ Yes ☐ No	
IF YES, EXPLAIN	
3-3 Are student-to-instructor ratios set by age and skill, with a maximum for students under 5? ☐ Yes ☐ No	
IF YES, EXPLAIN	
3-4 Are children waiting for their turn kept out of the water and supervised? ☐ Yes ☐ No	
IF YES, EXPLAIN	
3-5 Is a written emergency plan with rescue drills practiced at least quarterly? ☐ Yes ☐ No	
IF YES, EXPLAIN	
3-6 If yes to 2-1, is the home pool fenced and checked for hazards before lessons? ☐ Yes ☐ No	
IF YES, EXPLAIN	
3-7 Has a student drowned, nearly drowned, or been seriously injured? ☐ Yes ☐ No	
IF YES, EXPLAIN	

4 EXPOSURE & RISK QUESTIONS — POOL OPERATIONS & YOUTH PROTECTION

4-1 Are all drain covers VGB-compliant? ☐ Yes ☐ No
IF YES, EXPLAIN

4-2 Is pool chemistry tested and logged at least twice a day? ☐ Yes ☐ No
IF YES, EXPLAIN

4-3 If yes to 2-2, does the pool owner's contract define who provides lifeguards and insurance? ☐ Yes ☐ No
IF YES, EXPLAIN

4-4 Are all staff and volunteers who work with minors criminal-background and sex-offender-registry checked before starting? ☐ Yes ☐ No
IF YES, EXPLAIN

4-5 Do staff complete abuse-prevention training (e.g., SafeSport or equivalent) before working with minors and yearly after? ☐ Yes ☐ No
IF YES, EXPLAIN

4-6 Is there a written policy banning unobserved one-on-one contact between adults and minors, including texting and social media? ☐ Yes ☐ No
IF YES, EXPLAIN

4-7 Are suspected abuse reports made to law enforcement and child protective services within 24 hours? ☐ Yes ☐ No
IF YES, EXPLAIN

4-8 Are children released only to parents or guardians listed on file? ☐ Yes ☐ No
IF YES, EXPLAIN

4-9 Are locker rooms supervised, with no phones or cameras allowed? ☐ Yes ☐ No
IF YES, EXPLAIN

5 PAYROLL & RECEIPTS

TOTAL ANNUAL PAYROLL (\$) LESSON RECEIPTS (\$) HOME-POOL LESSON RECEIPTS (\$)

6 PRIOR INSURANCE & LOSS HISTORY

Attach currently valued loss runs for the last 5 years.

GL / PROFESSIONAL CARRIER / LIMITS ABUSE & MOLESTATION LIMIT UMBRELLA LIMIT

6-1 Has any carrier declined, cancelled, or non-renewed coverage in the last 5 years? ☐ Yes ☐ No
IF YES, EXPLAIN

DATE OF LOSS	DESCRIPTION	TOTAL INCURRED (\$)	OPEN / CLOSED

6-2 Is the applicant aware of any incident, complaint, or circumstance not yet resulting in a claim that could reasonably give rise to one? ☐ Yes ☐ No
IF YES, EXPLAIN

7 RISK MANAGEMENT

7-1 Is an AED on site with CPR-certified staff present? ☐ Yes ☐ No
IF YES, EXPLAIN

7-2 Are parents given written water-safety guidance for home? ☐ Yes ☐ No
IF YES, EXPLAIN

8 SIGNATURE & FRAUD WARNING

The undersigned declares that the statements and answers given in this supplemental are true, complete and correct to the best of their knowledge, and that no material fact has been withheld or misstated. The applicant agrees that this supplemental, together with all ACORD applications and attachments, forms the basis of any submission to insurers and may be relied upon by them. Signing this supplemental does not bind coverage. This supplemental is an intake document prepared by Cory Washington & Co. LLC to support carrier submission; it does not itself provide coverage.

FRAUD NOTICE: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance 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 subjects such person to criminal and civil penalties. (State-specific fraud warnings apply; see state amendatory notice.)

APPLICANT / AUTHORIZED SIGNATURE (TYPE FULL NAME)	TITLE	DATE
PRODUCER — CORY WASHINGTON & CO. LLC	PRODUCER SIGNATURE (TYPE FULL NAME)	DATE