



2005 Motorsport Risk Management Manual



JONES BROWN INC.
Insurance Brokers & Consultants

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Dear Motorsport Client:

This summary is intended to give you an overview of the coverage's provided to you through the Jones Brown Inc. Motorsport Insurance Program. We want to highlight certain portions of your policy that may assist you in understanding the coverage provided to you.

The Jones Brown Inc. Motorsport Insurance Program consists of two sections.

1. Comprehensive General Liability underwritten by Lloyds of London syndicate 2468, Marketform and provided in Canada through Premiere;
2. Participant Accident underwritten by Lloyd's of London.

No insurance policy covers everything. I do believe that you will find that the coverage provided to you is the broadest coverage available to the motorsport industry in Canada. This policy was put together with your operations in mind.

Please review the information provided and feel free to contact me at anytime to discuss.

Regards,

Kevin Besta, CIP
Partner
Jones Brown Inc.



PREMIERE
MOTORSPORT
UNDERWRITING INC.

LLOYD'S

SECTION 2

Comprehensive General Liability

This policy provides broad protection for situations in which an **INSURED** must defend itself against lawsuits or pay damages for bodily injury or property damages.

*Who is an **insured**?*

- 1) You, partners, spouses, officers and directors of the organization, your employees;
- 2) Any person or organization engaged in operating, managing, sanctioning, or sponsoring the covered program or providing the premise for a covered program including officials of the covered program;
- 3) Any participant, competition vehicle owners and competition vehicle sponsor;
- 4) Volunteers.

Note: the coverage provided for an insured is only in respect to the operations of the named insured.

Description of Coverage

BODILY INJURY

Means any physical harm, including sickness or disease to the physical health of other persons. It includes any of the following that results at any time from such physical harm, sickness or disease:

- Mental anguish, injury or illness;
- Emotional distress;
- Care, loss of services, or death.

PROPERTY DAMAGE

Means physical injury to tangible property, including the resulting loss of use of that property or the loss of use of tangible property that is not physically injured.

PERSONAL INJURY

Means injury, other than bodily injury, arising out of one of more of the following offenses:

- False arrest, detention or imprisonment
- Malicious Prosecution
- Invasion of privacy, right of privacy, humiliation, discrimination, harassment, wrongful eviction, wrongful entry, trespass,
- Oral or written publication of material that slanders or libels a person or organization or disparages a person's or organization's goods, products or services
- Emotional upset or defamation of character
- Oral or written publication of material that violates a person's right of privacy

ADVERTISING INJURY

Committed in the course of your advertising activities, means injury arising out of one or more of the following offenses:

- Oral or written publication of material that slanders or libels a person or organization or disparages a person's or organization's goods, products or services;
- Oral or written publication of material that violates a person's right or privacy;
- Misappropriation of advertising ideas or styles of doing business;
- Infringement of copyright, title or slogan.

CONTRACTUAL LIABILITY

Provides coverage for claims arising out of liability that has been assumed by the insured under a written or oral contract

PRODUCTS/COMPLETED OPERATIONS-protects against financial loss arising out of legal actions incurred by a manufacturer, merchant or distributor because of injury or damage resulting from the use of a covered product.

LIQUOR LIABILITY

Provides coverage for bodily injury or property damage for which you may be held liable by reason of:

- Causing or contributing to the intoxication of any person;
- Furnishing alcoholic beverages to a person under legal drinking age or under the influence of alcohol.

Description of Coverage - cont'd.

FOOD AND CONCESSION LIABILITY - see products liability.

MOBILE EQUIPMENT LIABILITY

Provides coverage for any land vehicle that is designed for use primarily off public streets or roads or kept for use only on or next to premise controlled by you.

INCIDENTAL MEDICAL MALPRACTICE LIABILITY

Means the rendering of or the failure to render necessary first aid on premises owned, operated, occupied, or controlled by any insured person who is not in the business or occupation of providing health care professional services.

TENANTS LEGAL LIABILITY

This insurance applies only to property damage to premise owned or rented to you, or occupied by you.

PREMISE

Defined as the buildings, other structures and land where the insured operation is conducted.

OPERATIONS

Defined as the activities that is usual and customary to your business.

PARTICIPANT LEGAL LIABILITY

This coverage responds to and defends the insured in a lawsuit being made against you by a participant in a covered event. This coverage will not apply to events where no system is in effect to collect waiver and release forms from persons entering a restricted area.

NON-OWNED AUTOMOBILE LIABILITY

This coverage provides legal liability for bodily injury to or death of any person or damage to property of others not in the care, custody and control of the insured. This coverage does not cover physical damage to the an insured owned vehicle nor does it replace or substitute for the vehicle owners liability insurance.

Policy Exclusions

The insurance does not apply to:

1. Events and/or activities not scheduled or not usual to your business - contact for coverage;
2. Fireworks - contact for coverage;
3. Concerts - contact for coverage;
4. Amusement devices (mechanically operated)-contact for coverage;
5. Intended or expected injury or damage-does not include bodily injury that results from the use of reasonable force to protect people and property;
6. Any obligation of the insured under a workers compensation, disability benefits or unemployment compensation law or similar law;
7. Bodily injury to an employee of the insured arising out of and in the course of employment by the insured;
8. Employment Related Practices;
9. Bodily injury to any person injured in the restricted area from whom you have not obtained a valid release and waiver form;
10. Bodily injury to any person under the age of majority in the province in which the event is held who is injured in a restricted area from which you have not obtained a valid release and waiver form signed by the minor's parent or legal guardian;
11. Bodily injury or property damage arising out of the ownership, use or operation by or on behalf of any insured of:
 - a) any automobile*, any motorized snow vehicle* or its trailers other than competition vehicles or official vehicles during a covered program while on the premises
 - b) any vehicle which if it were to be insured would be required by law to be insured under a contract evidenced by a motor vehicle liability policy, or any vehicle insured under such a contract, but this exclusion does not apply to the ownership, use or operation of machinery, apparatus or equipment mounted on or attached to any vehicle while at the site of the use of or operation of such equipment

Policy Exclusions - cont'd.

12. Watercraft;
13. Aircraft, air cushion vehicles;
14. Property damage to property you own, property you sell or give away;
15. Property in your care, custody and control;
16. Property damage to property owned by, leased to, rented to or used by any participant or your employee when in any restricted area;
17. Property damage to your product and property damage to your work;
18. Bodily injury or property damage due to the rendering or failure to render any professional services by you or for you;
19. Pollution liability;
20. Nuclear liability;
21. War and terrorism;
22. Asbestos;
23. Deliberately breaking the law;
24. Wrong description of goods, products or services;
25. An offense committed by an insured whose business is advertising, broadcasting, publishing or telecasting.

Note: This is a brief overview of the policy exclusions, terms, conditions and coverage. This is not intended to replace or substitute for the policy document. Please respect that all situations cannot be provided for in a policy summary. Please read and refer to your insurance policy at all times.

Motorsport Insurance Terms

COMPETITION VEHICLE

Means any self-propelled or land motor vehicle on the premises for the specific purpose of competing or performing in a covered program.

COVERED PROGRAM

Means any event, which is usual and customary to you and is known to the insurer. Covered program includes registration and technical inspections on or off the premises.

OFFICIAL VEHICLES

Means vehicles on premise, which are allowed access in the restricted area. An official vehicle includes, but is not limited to, an ambulance, fire truck, tow truck, pace car, communication workers car, physician car, course or safety marshal's car or any other substitute vehicle.

PARTICIPANT

Means any person that you grant permission to enter the restricted area but only if the person has clearly defined duties directly allotted to them as respects to a covered program and the person is within the restricted area.

PREMISES

Means the event course, road buildings or structures adjacent to the event course, official registration or inspection locations and/or any declared location.

RESTRICTED AREA

Means any area requiring special authorization, credentials or permission to enter and to which admission by the general public is restricted or prohibited.

Special Motorsport Coverage

- **NO EXCLUSION FOR A VEHICLE WHILE BEING USED IN ANY SPEED OR DEMOLITION CONTEST OR IN PRACTICE, PREPARATION FOR ANY SUCH CONTEST**
- **NO PARTICIPANT EXCLUSION**
- **AUTOMATIC BROAD ADDITIONAL INSURED ENDORSEMENT**
- **ADDITIONAL INSURED-MEDICAL PROFESSIONAL EMPLOYEES AND VOLUNTEERS.**
Policy is amended to include as additional insured any of your employees or volunteers working on your behalf who are physicians, surgeons, nurses, medical technicians, paramedics, trainers, ambulance drivers or attendants. Bodily injury or personal injury arising out of providing or failing to provide professional health care services to limited to:
 - \$300,000 limit of liability per occurrence
 - \$300,000 limit of liability annual aggregate.
- **ERRORS AND OMISSIONS LIABILITY**
Pay those sums that the insured becomes legally obligated to pay as damages because of Wrongful acts. This is limited to:
 - \$50,000 limit of liability per occurrence, subject to \$2,500 deductible
 - \$50,000 limit of liability annual aggregate
- **LIMITED FIREWORKS**
Insurance coverage does not apply except when the entity or person performing the fireworks has and maintains valid and collectable commercial general liability insurance that covers fireworks in the amount of at least \$1,000,000 and you are named as an additional insured on all liability insurance issued to the entity or person performing the fireworks.
- **PARTICIPANT'S PROPERTY DAMAGE LEGAL EXPENSES**
We will indemnify you for ninety percent of the actual costs of claim investigation and legal defense for claims brought against you alleging damage to the property of participants subject to \$100,000 per occurrence with \$2,500 deductible and \$100,000 annual aggregate.
- **TEMPORARY AMBULANCE COVERAGE**
The registered owner or driver of the temporary ambulance is added as an additional insured with respect to liability arising out of your premise or operations performed by you or on your behalf
- **FIRE SUPPRESSION COSTS AND EXPENSES**
Coverage to pay for fire suppression costs and expenses that the insured becomes legally obligated to pay under a forest fire prevention act or any other similar legislation enacted in any province in Canada. Subject to:
 - \$1,000,000 per occurrence, \$2,500 deductible
 - \$1,000,000 per annual aggregate



Special Motorsport Coverage - cont'd.

- **LEGAL LIABILITY FOR DAMAGE TO HIRED AUTOMOBILES**

Covers for damage from the care, custody and control of automobiles hired or leased from others used under the control of the Insured in the business of the Insured but shall not include any automobile owned in whole or in part by or licensed in the name of the Insured, or any partner, officer, or employee of the Insured. Subject to:

\$35,000 per occurrence, \$1,000 deductible

SECTION 3

Participant Accident

This insurance provides coverage per the schedule of benefits to participants that are injured in scheduled events

ACCIDENTAL DEATH AND DISMEMBERMENT

Coverage for the accidental death, or the loss of limb or limbs as a result of participating in a scheduled event.

LIMIT: \$10,000 (HIGHER LIMITS AVAILABLE UPON REQUEST)

ACCIDENT REIMBURSEMENT

Coverage for medical expenses (doctor bills, ambulance, hospital and medication bills) incurred as a result of an injury while participating in a scheduled event. This coverage is written on an excess basis over any other valid and collectable medical insurance that the injured participant might have available to them.

LIMIT: COVERAGE AVAILABLE UPON REQUEST-PER EVENT OR PER SEASON

REQUIREMENTS

Must be a participant at the event and have signed the appropriate waiver and release. Must contact officials of scheduled event before end of the event to report an accident, which might give rise to a claim.

FILING/BENEFIT PERIOD

Must receive first medical treatment within 30 days of accident.

EXCLUSION/LIMITATIONS

No coverage is provided for workers compensation related injuries, alcohol/narcotic related injuries, eyeglasses/contact lenses, dentures, crowns or caps, suicide, intentional/self inflicted injury, illness, unless developed as a result of the covered accident, pre-existing conditions. Reimbursement is limited to charges which do not exceed those generally charged for similar medical or dental care.

DEATH BENEFIT

Death benefits are made payable to the estate of the deceased.

SECTION 4

Waiver and Release

Guidelines for Waiver Registration

IT IS A REQUIREMENT OF YOUR INSURANCE COVERAGE THAT ALL PERSONS ENTERING A RESTRICTED AREA READ, COMPLETE AND SIGN THE WAIVER AND RELEASE.

PLEASE FOLLOW THESE INSTRUCTIONS TO MAINTAIN VALID INSURANCE. THE FAILURE TO IMPLEMENT A WAIVER AND RELEASE SYSTEM WILL NEGATE CERTAIN IMPORTANT INSURANCE COVERAGE.

1. USE ONLY RELEASE FORMS PROVIDED BY YOUR INSURANCE COMPANY
2. KEEP THE ENTIRE RELEASE SHEET IN VIEW OF SIGNERS.
Don't fold forms over the clipboard! This makes it more difficult for entrants to claim they could not read it, or were not permitted to read the release before they sign it.
3. HANDLE AND FILE RELEASES WITH CARE
Check to be sure every release sheet is signed and dated. Don't fold them when filing. Use a legal size folder. Don't mark anything on the releases, make notes on releases, or highlight names.
4. HAVE THE SAME PEOPLE HANDLE SIGN-INS AT ALL EVENTS.
They will be more consistent in handling releases. Be sure pit gate personnel sign and date each completed sheet.
5. BE SURE PIT GATE IS MANNED THROUGH ENTIRE RACE MEET.
Do not allow security or pit booth personnel to go off duty before the event is complete.
6. BE SURE PIT GATE STAFFS KNOWS WHAT TO TELL PERSONS ASKING WHAT THEY ARE SIGNING.
Suggestion: "This is a release and waiver of liability. It means you are entering a restricted area at your own risk, and accept total responsibility for anything that may happen to you"
7. REQUIRE ALL PERSONS TO COME TO PIT WINDOW AND SIGN RELEASE
Never pass clipboards into vehicles to be signed. Never allow any person to sign for others. Make sure everyone signs and prints his/her full name.
8. BE SURE EVERYONE ENTERING PITS/RESTRICTED AREAS SIGNS A RELEASE.
Include employees, press, guests, sponsors, drivers, crew/team members.

Guidelines for Waiver Registration - cont'd.

9. **DO EVERYTHING YOU CAN TO BE SURE EVERYONE KNOWS THEY ARE SIGNING A RELEASE.**
Display releases prominently, in all busy areas: pit restrooms, refreshment stands, tech/scale area, pay windows, etc. Mail release copies with annual memberships or include in newsletters. **IMPORTANT!**. Show and discuss release at pit meetings. Make large blow-ups of release with sign, "THIS IS THE RELEASE YOU SIGN-KNOW WHAT IT SAYS!" and post them at pit entrance and other locations (preferably lighted). Use a moving message sign at the pit window, that repeats, "YOU ARE SIGNING A RELEASE...KNOW WHAT IT SAYS...COPIES AVAILABLE". Imprint pit passes with a message of this type: "WARNING! The holder of this pit pass acknowledges signing the release and waiver, in exchange for admittance to the restricted areas. By signing, holder has waived certain legal rights, and acknowledges the potentially dangerous nature of activities in and adjacent to restricted areas."
10. **NEVER ALLOW MINORS TO SIGN THE ADULT WAIVER.**
11. **MAKE SURE YOU KNOW AND FOLLOW PROPER PROCEDURES FOR MINOR RELEASES.**
Make sure every minor signs the minor's release, and make sure both parents sign the parental release. **THIS MEANS BOTH PARENTS.** (It is acceptable to have the parental waiver and release signed on an annual basis) If a minor's parents do not live together, or live in different communities, both must still sign the parental release, so youthful entrants may have to go through some trouble to become eligible for competition. Make sure every minor presents proper ID when executing a release - a driver's license, birth certificate or social insurance number. On each race night, make sure every parent who accompanies a minor signs the adult waiver and make sure that the minor signs his nightly minors waiver and release.

THE WAIVER AND RELEASE PROTECTS YOUR BUSINESS AND ALL THE PARTICIPANTS. DO NOT IGNORE THE IMPORTANCE OF FOLLOWING THE INSTRUCTIONS. PROTECT YOURSELF.

SECTION 5

Claims Handling

Motorsports Incident Form Information

Complete all sections in as much detail as possible. Attach additional pages if necessary such as a copy of the waiver, observer's report, etc. Please contact Jones Brown if you need further information.

1. Complete an Incident Report for:

ALL INJURIES

Any physical injury, including when a driver sustains a hit hard enough to possibly result in soft tissue injury or states he/she might be injured. NOTE: Minor injuries (bee stings, small cuts, scrapes, etc.) sustained off-track (in paddock, garages, offices, etc.) and not involving a moving vehicle or spectator should also be reported.

2. Obtain original Releases and Waivers signed by injured party(ies). Do not send original until directed.
3. For any spectator injury, fatality or serious participant injury, obtain at least two eyewitness reports.
4. Return the completed form along with the following:
 - a) copy of the completed and signed event waiver;
 - b) copy of the completed and signed parental consent/minor waiver (if applicable);
 - c) written statement from medical/emergency personnel.
5. **In case of:**
 - A fatality;**
 - ANY INJURY TO A SPECTATOR;**
 - A serious participant injury no matter how caused;**
 - WHEN IN DOUBT, CALL:**

CRAWFORD CLAIMS ALERT
888-224-5677
24 Hours a Day
or call: KEVIN BESTA at 416-723-8779 (cell phone)

Note: please report all injuries, suspected injuries or refusals for treatment immediately after the event.

Incident Handling Guidelines

When a person at the event goes down with an injury -- and whether attention is given by an usher, nurse, EMT or other assigned personnel, both the injured person and the situation need to be evaluated and stabilized, whether it is until the ambulance arrives and takes over, until the person can be taken to the First Aid room for care and observation, or until the person refuses care and/or elects to return to the races without further attention. Regardless of which scenario and which personnel, there are a number of do's and don'ts while attending to the injured person's needs. Among them:

- ☑ **Don't** accept or even suggest fault for the incident.
- ☑ **Don't** make any promises about anything.
- ☑ **Don't** make payment or say his/her medical bills will be paid.
- ☑ **Don't** give any information about your insurance coverage.
- ☑ **Don't** recommend any medical facility unless told to do so.
- ☑ **Don't** reflect an attitude of boredom or nuisance or impatience.
- ☑ **Don't** argue or patronizingly agree with any disagreeable statement by the injured person.
- ☑ **Don't** leave the person unattended until transferred to health or security personnel in the pre-authorized manner or release at their own request.
- ☑ **Don't** fail to observe and record any significant circumstance.
- ☑ **Don't** hesitate to correct any hazardous situation (e.g., wet spot) as soon as reasonable after attending to the person.

- ☑ **Do** give respect and appropriate attention to the stricken person.
- ☑ **Do** assist within the local system of obtaining and recording the relevant information about the incident on the Report Form being used for this track.
- ☑ **Do** contact security or other designated personnel so that an investigation and warranted controls/remediations can be launched without unnecessary delay.
- ☑ **Do** ask the person what he/she believes happened and record such in his/her own words, if at all possible.
- ☑ **Do** note in the report, if observable circumstances differ from, or reflect in any way on, what the person is claiming.
- ☑ **Do** note in the report if the person is noticeably upset or actually complaining about the cause of his/her accident.
- ☑ **Do** give respect to any complaint.
- ☑ **Do** report the incident to Jones Brown Inc. In the case of fatality, spectator injury or serious participant injury call 1-888-224-5677 immediately and provide details.



Accident Report

Motorsports Variable Courses

(Check and/or circle one per section, complete relevant blanks)

INJURED: (Driver) (Pit Crew) (Official) (Spectator) (Other _____)			
Name: _____		Age: _____	Sex: (M) (F)
Address: _____			
City: _____	Prov.: _____	PC: _____	Phone: (_____) _____
Years Experience: _____	(1-3)	(4-9)	(10+)
TRACK NAME/LOCATION: _____			(Indoor) (Outdoor)
Policy #: _____	Sanctioned by: _____		
Race: _____	Track Length: _____		

INJURY:	TIME	DISPOSITION
DATE OF INJURY: _____	<input type="checkbox"/> Morning	<input type="checkbox"/> On-Site Care Only
INJURED BODY PART: _____	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Ambulance to: _____
CONDITION: _____ (Sprain, Fracture, Concussion, etc.)	<input type="checkbox"/> Evening	City: _____
	<input type="checkbox"/> Lights	
ESTIMATED ABSENCE FROM WORK: _____ (1-7 days) (1-3 weeks) (3+ weeks)		<input type="checkbox"/> Fatality
DOES INJURED DRIVER HAVE OTHER INSURANCE? (Y) (N) Company: _____		
TYPE:		
<input type="checkbox"/> STOCK CAR	<input type="checkbox"/> OFF ROAD	<input type="checkbox"/> SPORT CAR
<input type="checkbox"/> CART	<input type="checkbox"/> FORMULA	<input type="checkbox"/> GO-KART (Sprint) (Enduro)
<input type="checkbox"/> VINTAGE	<input type="checkbox"/> MOTORCYCLE (CLASS _____)	<input type="checkbox"/> OTHER
OCCASION:	LOCATION:	ACTIVITY:
<input type="checkbox"/> PRE-RACE	<input type="checkbox"/> LOADING AREA	<input type="checkbox"/> PASSING
<input type="checkbox"/> PRACTICE	<input type="checkbox"/> PADDOCK	<input type="checkbox"/> BEING PASSED
<input type="checkbox"/> TIME TRIALS	<input type="checkbox"/> PITS (Entrance) (Exit)	<input type="checkbox"/> SUDDEN MECH. FAILURE
<input type="checkbox"/> HEAT	<input type="checkbox"/> TURN#	<input type="checkbox"/> NORMAL RACING
<input type="checkbox"/> PIT STOP	<input type="checkbox"/> STRAIGHTAWAY	<input type="checkbox"/> MAINTENANCE (Fuel) (Tires) (Mechanical)
<input type="checkbox"/> YELLOW FLAG	<input type="checkbox"/> FENCE: (CC) (Wheel)	<input type="checkbox"/> LOADING/UNLOADING
<input type="checkbox"/> DURING RACE: (Start) (Early) (Mid) (Late) (Finish)	<input type="checkbox"/> GRANDSTAND: (Seats) (Steps) (Row #: (Low) (Mid) (Other))	<input type="checkbox"/> HORSEPLAY
<input type="checkbox"/> BETWEEN RACES	<input type="checkbox"/> OTHER	<input type="checkbox"/> OTHER:
<input type="checkbox"/> AFTER RACES		



Motorsports Variable Courses - Accident Report - cont'd.

SITUATION:	SURFACE:	CONDITION:	SPECIAL CIRCUMSTANCES:
IF MECHANICAL FAILURE:	<input type="checkbox"/> ASPHALT	<input type="checkbox"/> NORMAL	<input type="checkbox"/> VEHICLE PROBLEM
<input type="checkbox"/> LOST FRONT WHEEL (L) (R)	<input type="checkbox"/> DIRT	<input type="checkbox"/> WET	<input type="checkbox"/> FACILITY PROBLEM: (No Barrier) (Sharp Edge) Other:
<input type="checkbox"/> LOST REAR WHEEL (L) (R)	<input type="checkbox"/> MUD	<input type="checkbox"/> SNOW/ICE	
<input type="checkbox"/> CUT TIRE	<input type="checkbox"/> ICE	<input type="checkbox"/> IRREGULAR	<input type="checkbox"/> OTHER: (Unauthorized Presence) (Intoxication (Poor Judgement) (Poor Skill)) Other:
<input type="checkbox"/> BLOWN ENGINE	<input type="checkbox"/> CONCRETE	<input type="checkbox"/> OILY	
<input type="checkbox"/> STUCK THROTTLE	<input type="checkbox"/> OTHER	<input type="checkbox"/> OTHER	
<input type="checkbox"/> OTHER:			
IF NON-MECHANICAL:	DESCRIBE HOW ACCIDENT HAPPENED: (Over for witness information)		
<input type="checkbox"/> COLLIDED W/ _____			
<input type="checkbox"/> HIT BY _____			
<input type="checkbox"/> FALL (Slip) (Trip) (Pushed)			
<input type="checkbox"/> Other:	(Print)	(Title)	
	Completed by:	Phone:	

COMPLETE AND RETURN TO JONES BROWN INC.



Accident Report

Motorsports Oval Tracks

(Check and/or circle one per section, complete relevant blanks)

INJURED: (Driver) (Pit Crew) (Official) (Spectator) (Other _____) Name: _____ Age: _____ Sex: (M) (F) Address: _____ City: _____ Prov. _____ PC: _____ Phone: (_____) _____ Years Experience: _____ (1-3) _____ (4-9) _____ (10+)					
TRACK NAME/LOCATION: _____ (Indoor) (Outdoor)				Policy #: _____ Sanctioned by: _____ Race: _____ Track Length: _____	

INJURY:	TIME	DISPOSITION
DATE OF INJURY: _____	<input type="checkbox"/> Morning	<input type="checkbox"/> On-Site Care Only
INJURED BODY PART: _____	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Ambulance to: _____
CONDITION: _____ (Sprain, Fracture, Concussion, etc.)	<input type="checkbox"/> Evening	City _____
ESTIMATED ABSENCE FROM WORK: _____ (1-7 days) (1-3 weeks) (3+ weeks)	<input type="checkbox"/> Lights	<input type="checkbox"/> Fatality
DOES INJURED DRIVER HAVE OTHER INSURANCE? (Y) (N) Company: _____		
TYPE:		
<input type="checkbox"/> STOCK CAR (Modified) (Super Mod) (Street) (Demo)	<input type="checkbox"/> MOTORCYCLE (CLASS _____)	
<input type="checkbox"/> OPEN WHEEL (Midget) (Sprint) (Outlaw) (Modified) (CART) (Indy Car)	<input type="checkbox"/> VINTAGE	
<input type="checkbox"/> TRUCK (Pick-up) (Semi)	<input type="checkbox"/> GO-KART (Sprint) (Enduro)	<input type="checkbox"/> OTHER
OCCASION:	LOCATION:	ACTIVITY:
<input type="checkbox"/> PRE-RACE	<input type="checkbox"/> LOADING AREA (Garage)	<input type="checkbox"/> PASSING
<input type="checkbox"/> PRACTICE	<input type="checkbox"/> PITS (Infield) (Outside)	<input type="checkbox"/> BEING PASSED
<input type="checkbox"/> TIME TRIALS	<input type="checkbox"/> PIT ENTRANCE (Infield) (Outside)	<input type="checkbox"/> SUDDEN MECH. FAILURE
<input type="checkbox"/> HEAT	<input type="checkbox"/> TURN#	<input type="checkbox"/> NORMAL RACING
<input type="checkbox"/> PIT STOP	<input type="checkbox"/> STRAIGHTAWAY	<input type="checkbox"/> MAINTENANCE (Fuel) (Tires) (Mechanical)
<input type="checkbox"/> YELLOW FLAG	<input type="checkbox"/> FENCE: (CC) (Wheel)	<input type="checkbox"/> LOADING
<input type="checkbox"/> DURING RACE: (Start) (Early) (Mid) (Late) (Finish)	<input type="checkbox"/> GRANDSTAND: (Seats) (Steps) (Row #: (Low) (Mid) (Upper))	<input type="checkbox"/> UNLOADING
<input type="checkbox"/> BETWEEN RACES	<input type="checkbox"/> INFIELD (Parking) (Seating)	<input type="checkbox"/> HORSEPLAY
<input type="checkbox"/> AFTER RACES	<input type="checkbox"/> OTHER	<input type="checkbox"/> OTHER:



Motorsports Oval Tracks - Accident Report - cont'd.

SITUATION:	SURFACE:	CONDITION:	WITNESSES"
IF MECHANICAL FAILURE:	<input type="checkbox"/> ASPHALT	<input type="checkbox"/> NORMAL	<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> LOST FRONT WHEEL (L) (R)	<input type="checkbox"/> DIRT	<input type="checkbox"/> WET	* If yes, use reverse side of this form to record name, phone, address
<input type="checkbox"/> LOST REAR WHEEL (L) (R)	<input type="checkbox"/> MUD	<input type="checkbox"/> SNOW/ICE	
<input type="checkbox"/> CUT TIRE	<input type="checkbox"/> ICE	<input type="checkbox"/> IRREGULAR	
<input type="checkbox"/> BLOWN ENGINE	<input type="checkbox"/> CONCRETE	<input type="checkbox"/> OILY	
<input type="checkbox"/> STUCK THROTTLE	<input type="checkbox"/> OTHER	<input type="checkbox"/> OTHER	
<input type="checkbox"/> OTHER:			
IF NON-MECHANICAL:	DESCRIBE HOW ACCIDENT HAPPENED: <div style="text-align: center;">(Over for witness information)</div>		
<input type="checkbox"/> HIT MULTIPLE CAR PILE-UP			
<input type="checkbox"/> COLLIDED W/ _____			
<input type="checkbox"/> HIT BY _____			
<input type="checkbox"/> FALL (Slip) (Trip) (Pushed)			
<input type="checkbox"/> Other:	(Print)	(Title)	
	Completed by:	Phone:	

COMPLETE AND RETURN TO JONES BROWN INC.

Accident Report

Motorsports Drags & Straight Tracks

(Check and/or circle one per section, complete relevant blanks)

INJURED: (Driver) (Pit Crew) (Official) (Spectator) (Other _____)					
Name: _____		Age: _____		Sex: (M) (F)	
Address: _____					
City: _____	Prov. _____	PC _____	Phone: _____	(_____)	_____
Years Experience:	(1-3)	(4-9)	(10+)		
TRACK NAME/LOCATION: _____				(Indoor)	(Outdoor)
Policy #: _____	Sanctioned by: _____				
Race: _____	Track Length: _____				

INJURY:	TIME	DISPOSITION
DATE OF INJURY: _____	<input type="checkbox"/> Morning	<input type="checkbox"/> On-Site Care Only
INJURED BODY PART: _____	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Ambulance to: _____
CONDITION: _____ (Sprain, Fracture, Concussion, etc.)	<input type="checkbox"/> Evening	City _____
	<input type="checkbox"/> Lights	
ESTIMATED ABSENCE FROM WORK: (1-7 days) (1-3 weeks) (3+ weeks)	<input type="checkbox"/> Fatality	
DOES INJURED DRIVER HAVE OTHER INSURANCE? (Y) (N) Company: _____		

TYPE:	
<input type="checkbox"/> PROFESSIONAL: (Top Fuel) (Funny Car) (Pro Stock)	<input type="checkbox"/> MOTORCYCLE: (Class)
<input type="checkbox"/> SPORTSMAN ALCOHOL (Dragster) (Funny Car) (Other)	<input type="checkbox"/> TRUCK PULL (Monster) (Pick-Up)
<input type="checkbox"/> ELIMINATOR (Competition) (Superstock) (Stock)	<input type="checkbox"/> TRACTOR PULL (Modified)
<input type="checkbox"/> BRACKET CAR	<input type="checkbox"/> VINTAGE
<input type="checkbox"/> MUD-BOGGER	<input type="checkbox"/> OTHER

OCCASION:	LOCATION:	ACTIVITY:
<input type="checkbox"/> PRE-RACE	<input type="checkbox"/> LOADING AREA	<input type="checkbox"/> NORMAL RACING
<input type="checkbox"/> PRELIMINARY RUN	<input type="checkbox"/> PITS	<input type="checkbox"/> SUDDEN MECH. FAILURE
<input type="checkbox"/> ELIMINATION RUN	<input type="checkbox"/> STAGING AREA	<input type="checkbox"/> FUELING
<input type="checkbox"/> QUALIFYING RUN	<input type="checkbox"/> BURNOUT AREA	<input type="checkbox"/> MECHANICAL REPAIR
<input type="checkbox"/> DURING RACE: (Start), (Mild) Shutdown)	<input type="checkbox"/> COMPETITION AREA: (1 st Hall) (2 nd Hall)	<input type="checkbox"/> LOADING
<input type="checkbox"/> BETWEEN RACES	<input type="checkbox"/> SHUTDOWN	<input type="checkbox"/> UNLOADING
<input type="checkbox"/> AFTER RACES	<input type="checkbox"/> RETURN ROAD	<input type="checkbox"/> CROSSING TRACK
	<input type="checkbox"/> FENCE: (CC) (Debris)	<input type="checkbox"/> HORSEPLAY
	<input type="checkbox"/> GRANDSTAND: (Seats) (Steps) (Row #: (Low) (Mid) (Other)	<input type="checkbox"/> OTHER
	<input type="checkbox"/> OTHER	



Motorsports Drags & Straight Tracks - Accident Report - cont'd.

SITUATION:	SURFACE:	CONDITION:	SPECIAL CIRCUMSTANCES:
IF MECHANICAL FAILURE:	<input type="checkbox"/> ASPHALT	<input type="checkbox"/> NORMAL	<input type="checkbox"/> VEHICLE PROBLEM
<input type="checkbox"/> LOST FRONT WHEEL (L) (R)	<input type="checkbox"/> DIRT	<input type="checkbox"/> WET	<input type="checkbox"/> FACILITY PROBLEM: (No Barrier) (Sharp Edge) Other:
<input type="checkbox"/> LOST REAR WHEEL (L) (R)	<input type="checkbox"/> MUD	<input type="checkbox"/> SNOW/ICE	<input type="checkbox"/> OTHER: (Unauthorized Presence) (Intoxication (Poor Judgement) (Poor Skill) Other:
<input type="checkbox"/> CUT TIRE	<input type="checkbox"/> ICE	<input type="checkbox"/> IRREGULAR	
<input type="checkbox"/> BLOWER LIFTED	<input type="checkbox"/> SAND	<input type="checkbox"/> OILY	
<input type="checkbox"/> BLOWN ENGINE	<input type="checkbox"/> CONCRETE	<input type="checkbox"/> OTHER	
<input type="checkbox"/> STUCK THROTTLE	<input type="checkbox"/> OTHER		
<input type="checkbox"/> TRANSMISSION FAILURE	DESCRIBE HOW ACCIDENT HAPPENED: (over for witness information)		
<input type="checkbox"/> OTHER:			
IF NON-MECHANICAL:			
<input type="checkbox"/> COLLIDED W/ _____			
<input type="checkbox"/> HIT BY _____			
<input type="checkbox"/> FALL (Slip) (Trip) (Pushed)	(Print)	(Title)	
<input type="checkbox"/> Other:	Completed by:	Phone:	

COMPLETE AND RETURN TO JONES BROWN INC.

SECTION 6

Loss Control

Emergency Evacuation Guidelines

The sudden need to evacuate and secure the track requires planning, authority, and a master plan understood by all. The absence of such can only add to a catastrophe. Sudden need may arise from:

- (1) Severe weather (electrical or wind);
- (2) Unexpected catastrophe (such as riot, bleacher collapse, or plane crash); or
- (3) Potential catastrophe (such as bomb threat).

Whichever, the master plan is to bring order into the disorder of the circumstances being suddenly faced.

Decision Maker

On a race day, a chief decision maker must be known, accessible, and with the authority to move within established policies, procedures and criteria for action. Typically, this is delegated to the ranking staff person present, with the chief of security helping provide important information and implementing the decisions.

Informed Awareness

The security chief should see that information is readily processed as needed to and from designated liaison personnel from the weather station, police/sheriff department, fire department, and emergency medical services. Internally, he/she should organize a communication network with the head usher, gate and parking lot supervisors, concessionaries, major media and key backstretch personnel.

Course of Action

Directions to patrons, facility staff, and backstretch personnel for evacuation must be effective yet as simple as possible, whether out of prudence (bomb threat) or out of reality (earthquake). **The routes of evacuation must be monitored against obstruction and be other than the routes of entry by fire, police, and rescue personnel.** Plans should include alternatives for blocked routes, attentions to the parking area as well as the facility, securing the vacated premises, and routes for incoming emergency vehicles/personnel. Horse evacuation considerations must be explicit.

Communication System

A “command post” should be planned as the hub for processing all information and directions involving the decision maker, security chief, all liaison personnel, and the Track Announcer. Radio contact should be ready in lieu of or in addition to phone contact. Advance work sessions with all involved should include what local experts and authorities believe is the best way to handle the respective causes for evacuation to minimize panic among fans, etc.

Emergency Evacuation Guidelines - cont'd.

Evaluation

The best of planning cannot anticipate all glitches, and a practice staff communication exercise is helpful. Also of help would be the sharing of the master plan with a visiting outside expert who can review the plan as it fits the actual facility and community resources. **A review of the master plan by all persons sharing responsibility for its implementation should be done before each meet.**

Walk-Throughs at Motorsports Tracks

The risk of injury in motorsports is not limited to the drivers and their crew. Spectators get hurt too, often from unnecessary hazards that need to be found prior to the fact. It is principally “a matter of looking for them”, but some hazards are not as obvious as others. That is one reason why the insurance representative makes periodic visits.

Track owners and special event managers can spare themselves potential grief by making “a matter of looking for them” a matter of practice. Designated persons with designated targets of attention can make periodic walk-throughs of the spectator area an integral part of the operations. Have them see the grounds through the eyes of the excited youngster or the not-so-nimble senior citizen who are more observant of the fun around them than the nitty-gritty of watching their every step. Other considerations may appear more obvious once conscious attention is given to them, such as:

- ❖ Potholes or other tripping hazards in the parking area
- ❖ Loose/uneven sewer grates or manhole covers
- ❖ Deteriorated or uneven walkways
- ❖ Objects protruding into walkways
- ❖ Electrical cables and water hoses across walkways

or

- ❖ Spills and debris on walking surface around concessions
- ❖ Wetness and debris on walking surface in restrooms
- ❖ Absence of barriers to restricted areas
- ❖ Exposed machinery or electrical transformers
- ❖ Unsecured electrical box covers

or

- ❖ Deteriorated seating boards in bleachers and grandstands
- ❖ Loosened handrails
- ❖ Gaps at back or sides of seating areas through which small children can fall
- ❖ Poorly lighted walking areas, including parking lots
- ❖ Exit ways not clearly identified

or

- ❖ Electrical connections subject to submersion in water
- ❖ Electrical circuits not grounded or without overcurrent protection
- ❖ Outdated or discharged fire extinguishers
- ❖ Compressed gas cylinders (LP, helium, CO₂) not chained or otherwise secured in the upright position
- ❖ Contractors/sub-contractors without certificates of insurance

or ...

- ❖ Whatever constitutes an unnecessary hazard that can hurt the people who come to have fun. Don't wait for the professional.

SECTION 7

Miscellaneous

Emergency Requirements

MINIMUM PER ALL WHEEL-TO-WHEEL COMPETITION

- MEDICAL:** All events must have the following as a minimum:
- a) Vehicle equipped with basic medical equipment
 - b) No less than two (2) individuals of which one must be trained in emergency medical
- FIRE/RESCUE:** All events must have the following as a minimum:
- a) Separate vehicle (from medical vehicle) equipped with basic fire/rescue equipment
 - b) No less than two (2) individuals on which one must be trained in fire suppression.
- RISK MANAGEMENT IDEA:** It is recommended that you hire a third party by contract for the medical and/or rescue for your events. You should always make sure that you receive a certificate of insurance from the contractor naming your organization as an additional insured.

- *Note:*
- a) *St. John's Ambulance basic staffing will qualify as the medical vehicle requirement but not as both the personnel licensed in emergency medical.*
 - b) *Professionally trained fire/rescue is not limited to full/part time fire dept. personnel.*

Tuning and Testing

Tuning and Testing is an on-track activity that does not involve wheel-to-wheel competition. Each class of motorsports has its restrictions as to what is classified under the tuning and testing provision of the policy. The coverage has traditionally been included within the premises portion of the policy and not separately charged for.

Minimum requirements for Tuning and Testing:

- a) All on track activities must be supervised by an official of the facility who has the responsibility for the activity.
- b) All participants must read, complete and sign the waiver and release prior to participating in the tuning and testing.
- c) There must be a communication method for contacting outside medical assistance if required (such as land line telephone or cell phone).
- d) The basic emergency provisions are in place. Basic emergency provisions require:
 - (i) vehicle suitable for an injured person manned by not less than one (1) person certified in first aid;
 - (ii) one vehicle equipped with portable fire extinguishing equipment with no less than one (1) trained operator;
 - (iii) one vehicle capable of removing the damaged vehicle; and
 - (iv) communication/flagging system.

Tuning and testing is defined with the following maximum number of vehicles on the track at a time. Exceeding the maximum number require additional underwriting and may require additional premium.

Oval Track:	no more than one (1) car at a time
Drag Track:	no more than one (1) car at a time
Go Kart:	no more than ten (10) at a time with no wheel-to-wheel competition
Road Course:	no more than twelve (12) at a time with no wheel-to-wheel competition
Motorcycle:	no more than ten (10) at a time with no wheel-to-wheel competition
Off-Road (4X4):	no more than six (6) at a time with no wheel-to-wheel competition

Directors' & Officers' Insurance

If you are a director or officer of a non profit organization, a not for profit organization, a private company or a public company you require additional insurance coverage beyond the general liability that your organization purchases.

Directors and Officers Insurance provides protection to directors and officers of a corporation for their legal liability as a result of a claim against them for wrongful acts committed in their role as a director and officer. The coverage provides for legal and defense costs, damages, settlements and judgments.

Types of Events that could lead to claims:

- ❖ Misleading representation
- ❖ Neglect or breach of duty
- ❖ Breach of contract or copyright infringement
- ❖ Unpaid wages
- ❖ "Oppressed" shareholders, creditors or employees
- ❖ Unpaid taxes
- ❖ Conflict of interest
- ❖ Breached debt covenants
- ❖ Failure to ensure the corporation meets its financial obligations.

While the risk of such a claim may seem small, the cost to defend such a claim is large. Can you afford to put your personal assets at risk without proper protection? It costs nothing but your time to get a quotation. You should know the cost to protect yourself.

Please feel free to contact Carrie Clermont at (416) 408-5049 for an application. Carrie can also be reached by e-mail at cclermont@jonesbrown.com