

ISBA MUTUAL INSURANCE COMPANY

ENTERTAINMENT/SPORTS SUPPLEMENT

PLEASE TYPE OR PRINT IN INK. If space is insufficient to answer any question, please use Applicant letterhead. Please answer all questions completely.

Applicant Name: _____ Policy No.: _____

1. Within the past 5 years, has any member of the firm or predecessor firm provided advice or rendered legal or other services for any of the following types of clients: amateur athletes, amateur coaches, professional athletes, professional coaches, movie stars, theater stars, musicians, musical performers, other celebrities or persons well known to the public? Yes No
2. Within the past 5 years, has any member of the firm or predecessor firm handled or invested money or funds, or rendered investment advice, for any of the following types of clients: amateur athletes, amateur coaches, professional athletes, professional coaches, movie stars, theater stars, musicians, musical performers, other celebrities or persons well known to the public? Yes No
3. Within the past 5 years, has any member of the firm or predecessor firm acted as an agent, talent agent, contract negotiator, investment advisor, manager or promoter? Yes No

PLEASE NOTE: If **YES** to any of the above, please complete reverse side of this supplement.

I/We affirm that the information contained herein is true and complete to the best of my/our knowledge and that it shall be the basis of the policy of insurance and deemed incorporated therein, should the Company evidence its acceptance of this application by issuance of a policy.

Signature of Owner, Partner, or Officer _____ Date _____

Print Name _____ Title _____

