



**AMERICAN
HUNTING LEASE
ASSOCIATION**

Guides & Outfitters Application
Please Complete and Return with payment
Email: info@ahuntinglease.org
www.ahuntinglease.org/guides-and-outfitters
Phone: 866-782-6330

When you purchase Guide/Outfitter membership (Liability Insurance) through the AHLA, you receive a complete risk management package for your Operation! Your package includes an AHLA membership, a liability insurance policy, use of our customizable waiver of liability and devoted account space on our website to manage your policy.

Limits Of Liability	
<p>✓ \$1,000,000 Per Occurrence/\$2,000,000 Aggregate</p> <p>✓ 1,000,000 Bodily Injury/ Property Damage</p> <p>✓ 1,000,000 Personal Injury and Advertising Liability</p>	<p>✓ \$1,000,000 Products/Completed Operations</p> <p>✓ 100,000 Damage to Rented Premises</p> <p>✓ 5,000 Medical Payment</p>
<p>**All Operations Must Be Hunting and/or Fishing Related</p> <p>** There must be a liability waiver or hold harmless agreement signed by each guest and kept on file**</p>	
Type of Operation	
<p><input type="checkbox"/> Hunting <input type="checkbox"/> Fishing <input type="checkbox"/> Other _____</p>	
Qualifying Questions	
Are all operations conducted within the US.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are all Operations Hunting and/or Fishing Related	<input type="checkbox"/> Yes <input type="checkbox"/> No
If ATVs are used by clients/guests are helmets required to be worn?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If tree stands are used are safety harnesses required to be utilized?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you use drop camps?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will clients/guests only be transported by ATVs, UTVs, golf carts, trucks, cars or boats (no horseback)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are boats/watercraft used less than 25 feet, 250 HP or less and not older than 10 years	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you require a liability waiver or hold harmless agreement signed by each guest (or parent if minor) and kept on file?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has Guide/Outfitter seeking coverage filed a claim for a covered loss in the last 36 months.	<input type="checkbox"/> Yes <input type="checkbox"/> No
How many years has Guide/Outfitter been in business?	_____ Years
a. If less than 3 years, how many years of prior experience?	_____ Years
Please provide prior experience on the last page of application.	
Do you offer any of the following activities:	<input type="checkbox"/> Yes <input type="checkbox"/> No
• Recreational ATV Activities	• White Water Rafting
• Guided Eco Tours	• Cycling
• Recreational Boating/Kayak/Canoe	• Swimming
• Mountain Climbing	• Snowmobiles
• Parasailing	• Horseback Riding
• Downhill Skiing	• Dog Sled Tours
	• Hay, Sleigh or Wagon Rides



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*Required	Insured Information
*Business Name: _____	*Tax ID#: _____
*Contact Name: _____	*Email address: _____
*Mailing Address: _____	*City: _____ *State: _____ *Zip Code: _____
Location Address (If Different): _____	
Telephone Work/Home: _____	Cell Phone: _____
*Website: _____ OR Facebook URL: _____	
*Business Type: <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Individual <input type="checkbox"/> LLC <input type="checkbox"/> Other	

Additional Insured - \$35 Each		(Attach separate sheet if needed)
Property Owner Name	Complete Mailing Address	Location of Property: State, County, Acreage

Guide Section
What is the maximum number of guests at any one time? (hunting & fishing, etc.) _____ Guests
What percentage of your hunting operations are semi-guided? _____ %

Guide Information				(Attach separate sheet if needed)
Guide name: _____	Age: _____	Yrs Exp: _____	First Aid Qualifications: _____	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Guide name: _____	Age: _____	Yrs Exp: _____	First Aid Qualifications: _____	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Guide name: _____	Age: _____	Yrs Exp: _____	First Aid Qualifications: _____	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time



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Watercraft Liability Section						
Year <small>(less than 10 years old)</small>	Make & Model	Length <small>(25ft or less)</small>	HP <small>(250 HP or less)</small>	OB/IB/IO	# Pass	Guided
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
On what bodies of water does use take place? <input type="checkbox"/> Rivers <input type="checkbox"/> Lakes <input type="checkbox"/> Ocean <input type="checkbox"/> Bays/Inlets <input type="checkbox"/> Name _____ If Rivers, what classes are boated? <input type="checkbox"/> Class I <input type="checkbox"/> Class II <input type="checkbox"/> Class III <input type="checkbox"/> Class IV <input type="checkbox"/> Class V Are life vests (PFD's) required? <input type="checkbox"/> Yes <input type="checkbox"/> No Are life vests (PFD's) provided? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Liability coverage from the use of a boat or watercraft under the size limits listed above and only for hunting and/or fishing activities.						
Guided Activities						
Activities Permitted	# of Guides	# of Days Used	Receipts			
Guided Fishing			\$			
Guided Hunting			\$			
Annual totals from activities listed above			\$			

Notice to Applicants, by signing this application you agree: Any person, who knowingly and with intent to defraud any insurance company or other person, files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, concerning any fact material thereto, commits a fraudulent insurance act which is a crime and may subject such person to criminal and civil penalties.

Signature of Application: _____ Date: _____
 **Pending Underwriting Approval

Please make checks payable to American Hunting Lease Association.

The American Hunting Lease Association is a trade association promoting and protecting the hunting lease concept. The AHLA is not an insurance agency and makes no claims as such. All liability insurance is produced by Assured Partners and made available through an exclusive partnership with the AHLA.

Payment Details				
Please call us or visit our website for payment total.				
Annual Policies start the 1st of every month, when would you like coverage to begin? _____				
Credit/Debit Card Number:				
Expiration Date:				
CVC:				
Name as it appears on the card:				
Billing Address:				
City:		State:		Zip Code: