

Student Youth Tour Operators - Supplemental Questionnaire

Zurich American Insurance Company and Steadfast Insurance Company

Company Name: _____

Address: _____

Contact Name / Principal: _____

Phone #: _____

Fax #: _____

Desired Limit of Liability: _____

Please complete the following *in addition to* sections 2 and 3 of the main application form:

1. General Description

a. What percentage of your company's total volume is derived from tours for **students K – 12**? _____%

Please list the percentage in each category:

% Grade School _____

% Middle School _____

% High School _____

b. What percentage of your **K – 12 tours** falls within each of the following categories (total must equal 100%)?

_____ Educational Tours

_____ Festivals / Performance

_____ Summer / Teen Travel

_____ Other (please provide details): _____

c. Do you operate / arrange tours or trips for **College Students (18 – 25)**? Yes _____ No _____

If yes, what percentage of your total volume does this category represent? _____% Please provide description of these trips / tours. Attach a separate sheet, if necessary.

d. For your **K – 12 tours / trips**, please provide the following for your last school year:

<u>Length of Tour</u>	<u>#</u>	<u>Average Cost Per Person</u>	<u>Yearly # of students</u>
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1 day trips	_____	_____	_____
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3 – 5 day trips	_____	_____	_____
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5 – 10 day trips	_____	_____	_____
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over 10 days	_____	_____	_____
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e. What is the average **chaperone to student ratio** for your:

Day Trips _____ Overnight trips _____

f. List your **most common destinations** for:

Day Trips _____
 Overnight Trips _____
 Teen Summer Tours _____
 Festivals / Performances _____

g. Do any of your tours include the following?

Category	No	Yes	If yes, what %
Homestays			
Exchange / Study Abroad			
Language			
Working Holidays (internships, for example)			
Gap Year			
"Spring Break" / Grad Trips or similar tours			

For all "yes" answers, please attach a description.

h.

Annual Totals	K – 12	College-aged
# of Students:		
Gross Sales:		

2. Service Contracts

a. What percentage of your trips / tours are **contracted directly** with the following:

_____ School administration / teachers (authorized by school administration)
 _____ Sponsors (not authorized by school administration)
 _____ Parents (not authorized by school administration)
 _____ Youth Organizations (Boys Scouts / Girl Scouts, etc.)
 _____ Other _____

b. What percentage of the contracts are **signed by both the operator and the contracting person / organization?** _____%

c. What percentage of these contracts include **responsibility / limitation of liability clauses?** _____%

d. Do any include an **"arbitration" clause?** Yes _____ No _____.

e. **Please provide sample contracts, responsibility / limitation of liability clauses, and arbitration clauses, if you answered "yes" to the above.**

3. Principals

Please attach a resume for each of your principals that is specific to his / her experience in student / youth travel or tour operations (position, number of years and duties).

4. Employees

a. Are **background checks** conducted on all full or part time employees who would have contact with students? (office/administrative employees excluded) Yes _____ No _____.

If no, please describe your employee selection process (attach a separate sheet, if necessary).

5. Independent Contractors: Tour Escorts / Security Guards / Step-on-Guides / Life Guards

a. Please check which of the following are sub-contracted for any of your tours:

- _____ Security Guards
- _____ Tour Escorts / Tour Directors / Tour Managers
- _____ Life Guards
- _____ Step-on-Guides
- _____ Other _____

b. Do you have **minimum age requirements** for these independent contractors? If so, what are they?
_____.

c. Are **background checks** conducted on any of these individuals? Yes _____ No _____

If yes, which ones? _____.
By your company? _____
By the supplier? _____

If no, please explain process for hiring including minimum requirements. -----.

d. If the supplier conducts the background checks, **are you indemnified by that supplier** (held harmless in your contract with the supplier) and / **or included as an additional insured** on the supplier's liability policy? Yes _____ No _____. If "yes", please provide a sample agreement.

6. Release Forms

a. Are **release forms** signed by the parents of each child participating in the tour? Yes _____
No _____. If yes, **please attach a sample parental release form.**

b. When are they received? Before or after the trip? _____.

c. How are these forms distributed / collected? _____

d. Are they returned to you, the operator? Yes _____ No _____. If yes, how long do you maintain these records? _____. If No, who maintains? _____ For how long? _____. Do you have access to these forms? _____.

e. Is a full description of the itinerary, including all scheduled or optional activities, released to the parents of each child? If so, please describe the process. _____

_____.

f. Are **medical forms** completed for: Day trips? _____ Overnight trips? _____.

Do these include a **healthcare proxy**? Yes _____ No _____. **Please attach a sample medical form.**

7. Activities

Check which of the following activities are included in any of the tours / trips you arrange. Please provide the average percentage of your day trips and overnight trips that would include these activities.

	Activity	% day trips	% overnight trips
	Water sports (swimming; boating; snorkeling; scuba diving; etc.)		
	Horseback riding		
	Hiking		
	Biking		
	Caving		
	Camping (tents or cabins)		
	River rafting		
	Organized sports (baseball, football, soccer, etc.)		
	Any activity requiring equipment?		

8. Equipment

- a. Do you supply the tour participants with any equipment? Yes _____ No _____.
- b. If yes, what type of equipment do you supply? _____.
- c. If this equipment _____ Owned / leased by your company? _____ Rented by your company?
- d. Are you responsible for the maintenance / repair of this equipment? Yes _____ No _____.

9. Transportation

Please be certain to complete Section 3 of the main application form. In addition, please answer the following:

- a. What percentage of your tours / trips involve **motorcoach transportation** that are:
 - Arranged by the school _____%
 - Arranged by your company (using subcontractors) _____%
 - Supplied by your company (using your own vehicles) _____%
- b. For the transportation services, do you require proof of **additional insured protection** *or* written **indemnification protection** (hold harmless clause)
 - From the schools? Yes _____ No _____
 - From the subcontractors? Yes _____ No _____

If yes, please provide samples.

- c. What percentage of your trips / tours include the use of:

Vans _____%
Jeeps _____%

Please describe the circumstances under which you would use either of these vehicles.

- d. Would there be any circumstances under which you, one of your employees, or one of your tour escorts would drive any vehicle that is not owned by you or your company in any tours or trips you arrange?

Yes _____ No _____.

If yes, please describe circumstances.

e. **If your employees or tour escorts drive** any participants during the course of the tour / trip, do you

have a minimum age requirement for the drivers? If yes, what is it? _____
review a DMV report on each driver? Yes _____ No _____
have a written policy that participants are not permitted to drive the vehicle? Yes _____ No _____

f. **If you subcontract the transportation services** (when not using the school's transportation), do you require that the supplier conduct **background checks (DMVs and criminal) on all drivers?**

Yes _____ No _____.

10. Crisis Management / Emergency Plans

a. Do you have a written crisis management / emergency plan? Yes _____ No _____.

If yes, please attach a copy.

11. Written Code of Conduct

a. Do you have a written "Code of Conduct" / "Rules and Regulations" document that is distributed to both parents and students? Yes _____ No _____.

b. If yes, do both parents and students sign? Yes _____ No _____.

Explain any "no answers". _____.

12. Written Harassment Policy for Employees / Tour Escorts (Race, Sexual Orientation, Gender, Age, Handicaps, Religious, etc.)

a. Do you have one? Yes _____ No _____

If yes, please attach a copy.

13. Accommodations

a. What percentage of overnight your tours / trips include stays at:

Hotels _____%
Motels _____%
College campuses _____%
Camp Grounds _____%
Private Homes _____%
Other _____%

14. Insurance Disclosures

a. Do you ever cite your liability insurance coverage or limits:

in brochures	Yes _____	No _____
on a Website	Yes _____	No _____
on travel documents	Yes _____	No _____
in a proposal	Yes _____	No _____
anywhere else?	_____	

15. Supervision

a. Day Trips

In addition to school chaperones / teachers, who else would responsible for the general supervision of students on day trips?

Do you have authority to remove a student from a trip if she / he is disruptive? Yes ____ No _____. If yes, where and when is this stated?

b. Overnight Trips

In addition to school chaperones / teachers, who else would responsible for the general supervision of students on overnight trips?

Do you have authority to remove a student from a trip if she / he is disruptive? Yes ____ No _____. If yes, where and when is this stated?

c. Do you arrange for any **additional security** at the hotels? Yes _____ No _____. If yes, what percentage is through:

The hotel / facility _____%

Security Firm (subcontracted by you or the hotel) _____%

d. Are you provided with **additional insured or indemnification protection** from:

The hotel Yes _____ No _____

The Security Subcontractor Yes _____ No _____

e. If you contract with the Security Firm, please provide a description of your standard operating procedures for the selection of these firms.

Applicant's Name _____

Applicant's Title _____

Company Name _____

Applicant's Signature _____

Date: _____