GLATFELTER PUBLIC PRACTICE℠
A Division of Glatfelter Insurance Group

Textbook insurance program

CHALLENGE COURSE QUESTIONNAIRE

Addendum to School Supplemental Application

Named Insured:

1. Is the local program designed and accredited by an outdoor education organization such as Project Adventure? ☐ Yes ☐ No
   If so, who? _____
2. Is one or more of the instructors certified by the outdoor education organization? ☐ Yes ☐ No
   Is this documented? ☐ Yes ☐ No
3. What provisions are made to keep instructors up-to-date and/or to train new instructors?
   _____
4. Do trained instructors deliver all instruction? ☐ Yes ☐ No
5. Does the Insured ever use substitute teachers in the program? ☐ Yes ☐ No
6. Does the Insured follow the outdoor education organization's safety manual? ☐ Yes ☐ No
   Does the Insured have its own safety manual and do they have regular safety review sessions with instructors? ☐ Yes ☐ No
7. How does the Insured prevent use of the equipment by non-authorized personnel?
   _____
   _____
8. What first aid equipment is available on-site?
   _____
9. Is staff qualified to administer first aid? ☐ Yes ☐ No
10. What are the procedures for contacting emergency services? (Ambulances, etc.)
    _____
11. What communication equipment is available on-site to the instructors?
    _____
12. Does the Insured maintain and analyze accident reports? ☐ Yes ☐ No
    What is the accident history of this program? _____
13. Does the Insured have specific equipment maintenance and inspection policies? ☐ Yes ☐ No
    Are inspections documented? ☐ Yes ☐ No
14. Is there a written, approved curriculum, and are there daily lesson plans? ☐ Yes ☐ No
15. Are parents and students warned about the hazards and potential injuries of the course? ☐ Yes ☐ No
    Is formal consent obtained from the parents and/or students? ☐ Yes ☐ No
16. Are clothing and equipment appropriate for the program? ☐ Yes ☐ No
17. How long has the Insured had the program? _____
18. Provide details of on-site facilities (rock climbing walls, rope courses, etc.). _____
    _____
    _____