



## Recreational Activities Application

- |       |   |            |  |           |
|-------|---|------------|--|-----------|
| 9.    | What is the maximum speed setting on any kart? _____ mph                                |            |  |           |
| 10.   | What is the maximum horsepower of any one kart? _____ mph                               |            |  |           |
| 11.   | Can the "governor" be adjusted by the rider?  | Yes        |  | No        |
| 12.   | Can the karts be radio controlled from a central station?                               | Yes        |  | No        |
| 13.   | Is a remote control device for emergency slow down or shut down of the karts installed? |            |  |           |
|       |   | Yes        |  | No        |
| 14.   | Are rules explained before operators begin using the karts?                             | Yes        |  | No        |
| 15.   | Are safety procedures and rules posted in the open and in the karts?                    | Yes        |  | No        |
| 16.   | What are the minimum height and age requirements for drivers?                           |            |  |           |
| <hr/> |   |            |  |           |
| 17.   | Are karts equipped with roll-bars and bumper guards?                                    | Yes        |  | No        |
| 18.   | Who manufactured the karts? _____   |            |  |           |
| 19.   | Are employees trained in first aid?   | Yes        |  | No        |
| 20.   | Is racing allowed?  | Yes        |  | No        |
| 21.   | Are gas and break pedals color-coded? _____   | Yes        |  | No        |
|       | If yes, what colors are used? _____   |            |  |           |
| 22.   | <b>Is a waiver/release required?</b>  | <b>Yes</b> |  | <b>No</b> |
|       | <b>If yes, please submit a copy.</b>  |            |  |           |

### Skateboard Parks, Rollerblade or BMX Tracks

- |       |   |            |  |           |
|-------|---|------------|--|-----------|
| 1.    | Is the facility indoors or outdoors?  |            |  |           |
|       |   | Indoor     |  | Outdoor   |
| 2.    | If outdoors, is it fenced?  | Yes        |  | No        |
| 3.    | Can the facility be locked?   | Yes        |  | No        |
| 4.    | Are rules posted?   | Yes        |  | No        |
| 5.    | Is the park supervised at all times?  | Yes        |  | No        |
| 6.    | How many attendants on duty?  | Yes        |  | No        |
| 7.    | <b>Is a waiver/release required?</b>  | <b>Yes</b> |  | <b>No</b> |
| 8.    | <b>Please submit a drawing of the facility detailing the jumps and ramps.</b> |            |  |           |
| 9.    | What is the maximum height of any one ramp? _____                             |            |  |           |
| 10.   | Any rails on stairs? _____  | Yes        |  | No        |
|       | Please describe. _____  |            |  |           |
| <hr/> |   |            |  |           |
| 11.   | Are bicycles allowed on the track?  | Yes        |  | No        |
| 12.   | Are bicycles allowed on the track at the same time as skaters?                | Yes        |  | No        |

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13. How often is the facility inspected, by whom? \_\_\_\_\_  
 Are records kept and for how long? \_\_\_\_\_
14. What type of safety equipment is required? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### **Laser Tag or Paintball**

1. What are the gross receipts? \_\_\_\_\_
2. Is the facility enclosed by a fence? Yes    No  
 Can the facility be locked? Yes    No
3. What safety protection gear is required or provided?  
 \_\_\_\_\_  
 \_\_\_\_\_
4. Describe any barriers of obstacles and their construction?  
 \_\_\_\_\_  
 \_\_\_\_\_
5. Any hand to hand fighting allowed? Yes    No
6. Please submit a drawing of the premise.
7. **Is a waiver release used?** **Yes    No** **Please submit a copy.**
8. Are games refereed? Yes    No If yes, by whom: \_\_\_\_\_
9. Are customers allowed to bring their own equipment? Yes    No
10. Is the customer's equipment checked before use to assure that it meets minimum safety requirements? Yes    No
11. How often is your equipment tested and velocity check? \_\_\_\_\_  
 By whom? \_\_\_\_\_
12. Are your employees trained in first aid? Yes    No
13. Are there rules of play and are they posted? Yes    No
14. What kind of eye protection is required?  
 \_\_\_\_\_  
 \_\_\_\_\_