



DEMONSTRATION JUMP INSURANCE APPLICATION

1. Terms:

For each exhibition, a completed Demonstration Jump Insurance Application AND payment should be received at least 3 days before the certificate is needed for an intended jump (or series of jumps) at the same location.

Application and payment can be mailed, faxed or emailed to **Kristi Nix** or **Karen Moore**.

Mail to: Kimmel Aviation Insurance Agency, Inc., 442 Airport Road, Greenwood, MS 38930

Fax: (662) 455-1611

Website: www.KimmellInsurance.com

Email: Kristi@KimmellInsurance.com

Phone: (662) 455-3003

Karen.Moore@KimmellInsurance.com

(316) 669-9500

2. Definition:

A demonstration jump, also called a display or exhibition jump, is a jump at a location other than an existing drop zone done for the purpose of reward, remuneration, or promotion and principally for the benefit of spectators. **Competition events and/or for-profit events sponsored by drop zones do not qualify for demonstration insurance.** Contact Kimmel Aviation Insurance Agency for quotes on General Liability Event Insurance.

For coverage to be valid, each insured jumper MUST comply with the USPA BSRs and the recommendations stated in the Skydiver's Information Manual (SIM) Section 2-1 as well as those attached hereto.

Tandem jumps may be part of a demonstration jump only if the jump is performed in accordance with current USPA BSRs and FAA regulations.

- » **Open Field and Level 1** – no experience necessary for the passenger
- » **Level 2** – the tandem instructor **AND** passenger must hold a current USPA D license and PRO rating.
- » **Stadium** – tandem jumps into stadiums are prohibited by USPA and the FAA.

3. Requirements:

Open Field and Level 1:

- » Current USPA C license or higher, and
- » Minimum of 200 jumps, and
- » 50 jumps within the previous 12 months, and
- » Five (5) jumps within the previous 60 days on a canopy that is plus or minus 20% in size to be used for demonstration, not to exceed the minimum canopy size the jumper is allowed to jump

Level 2 and Stadium

- » Current USPA PRO rating, and
- » 50 jumps in the previous 12 months, and
- » Five (5) jumps within the previous 60 days on a canopy that is plus or minus 20% in size to be used for demonstration, not to exceed the minimum canopy size the jumper is allowed to jump

4. Applicant Information (must be participating in the jump):

Name of Certificate Holder: _____

Name of Team (if applicable): _____

Mailing address: _____

City: _____ State: _____ Zip code: _____

Phone: _____ Fax: _____ Email: _____

5. Jump Information:

Date(s) of jump:_____ Alt. Date (if any):_____

Venue name:_____

Location address:_____

City:_____ State:_____ Zip code:_____

Name of event:_____ Type of event:_____

Will there be tandem jumps? ☐Yes ☐No Please explain: _____

Type of landing areas as defined in SIM, Section 2-1 (check one):

☐ Open Field ☐ Level 1 ☐ Level 2 ☐ Stadium

6. Insured Participants (required):

List all qualified potential participants. You can attach additional pages if necessary.

Participant(s) Name	USPA #	USPA Expiration	PRO (Y/N)

6a. Additional insured (landlord, landowner, tenants, host, sponsors, organizers, or ground crew).

Note: Aircraft owner and pilot are not covered under the insurance and will not be named as additional insured.

Name	Relationship to Demo Jump

7. Premiums

Using the charts below, select your coverage limit and payment amount.

Credit/Debit Card: Complete item 10 on page 4. This transaction will include a 3.25% security fee.

ACH electronic check payment: Go to www.kimmelinsurance.com using the Bill Pay tab to complete this transaction. No Fee for this method. Email a copy of your payment confirmation with the application.

Checks/Money Order payments: mail to our office with the application.

Limit	\$250,000	\$500,000	\$1,000,000	\$2,000,000	\$3,000,000	\$4,000,000	\$5,000,000
1 Day	\$245	\$400	\$495	\$952	\$1,012	\$1,078	\$1,122
2 Day	\$475	\$775	\$950	\$1,617	\$1,733	\$1,848	\$2,019
3 Day	\$675	\$1,025	\$1,400	\$2,024	\$2,310	\$2,365	\$2,772
4 Day	\$725	\$1,350	\$1,500	\$2,310	\$2,541	\$2,657	\$3,003
5 Day	\$900	\$1,500	\$1,650	\$2,640	\$2,772	\$2,888	\$3,234
6 Day	\$1,000	\$1,650	\$1,800	\$2,943	\$3,119	\$3,174	\$3,289
7 Day	\$1,250	\$1,850	\$2,000	\$3,119	\$3,289	\$3,350	\$3,636
Annual Policy	\$5,000	\$7,500	\$9,500	\$13,781	\$15,986	\$17,640	\$19,845

8. Cancellation:

In case of cancellation of a jump due to weather conditions, you need to notify our office **on the date of the jump** via phone message or email. Premium will be refunded minus a \$50.00 agency fee and any applicable credit card or security fees.

9. Certification:

I understand it is my responsibility to obtain the prior advice of my S&TA, Examiner or Regional Director prior to the jump. I certify that all jumpers listed meet the necessary requirements for this demonstration. I certify that all jumps will be made in accordance with this document, the SIM and FARs.

Person whose advice I obtained: _____ Date: _____

Applicant's Signature: _____ Date: _____

**COVERAGE WILL BE ISSUED ONLY UPON RECEIPT OF SIGNED APPLICATION,
SATISFACTION OF ALL INSURANCE REQUIREMENTS AND PAYMENT OF PREMIUM.**

10. Credit Card Payment Authorization

Name as it appears on the card: _____

Card number: _____ CVC(last 3 on back): _____ Expiration date: ____ / ____
MM YYYY

Billing address: _____

City: _____ State: _____ Zip code: _____

Insureds Name: _____

Email address for receipt: _____

Total to charge: _____

Note: 3.25% Secrurity Fee will appear on your credit card statement as "Insurance Payment Securfee"

I hereby authorize Kimmel Aviation Insurance Agency, Inc. to charge my insurance premium to the credit card listed above.

Cardholder's Signature: _____ Date: _____