BUSINESS ACTIVITIES

Refer to the Supplemental Declarations if information is not shown on this form.

For an additional premium, ***we*** provide coverage under this endorsement subject to the ***terms*** contained in the General Policy Provisions.

WHAT *WE* PAY FOR

Coverage L~~—~~-Personal Liability and (if included) Coverage M~~—~~-Medical Payments to Others apply to ~~the~~***your*** ***business*** activities ~~of the ***insured*** as described in this endorsement or in the Declarations.~~policy.

Name

Business

Coverage M—Medical Payments to Others does not apply ~~under this endorsement~~ unless shown as included:
~~.....~~ ☐ ~~.....~~ included.

WHAT *WE* DO NOT PAY FOR

This insurance does not apply:

1. to ***bodily injury*** or ***property damage*** in connection with a ***business*** owned or ~~financially~~ controlled ~~solely~~ by ~~the ***insured***~~***you*** or by a partnership of which ~~the ***insured*** is~~***you*** are a partner;
2. to ***bodily injury*** or ***property damage*** arising out of the rendering of, or failure to render, professional services of any nature (other than teaching~~); ()~~. This includes, but is not limited to, any architectural, engineering or industrial design services; any medical, surgical, dental or other services or treatment for the health of persons or animals; and any beauty or barber services or treatment~~)~~.
3. to ***bodily injury*** to a fellow employee ~~of the ***insured*** injured in the course of employment; or
4. when ~~the ***insured*** is~~***you*** are a member of the faculty or teaching staff of any school or college;
   a. to ***bodily injury*** or ***property damage*** arising out of the maintenance, use, loading or unloading of draft or saddle animals, vehicles for use therewith, aircraft, ***motor vehicles***, ***recreational motor vehicle***s or watercraft:
      1) owned, operated, or hired by or for ~~the ***insured***~~***you*** or ~~his or her~~***your*** employer; or
      2) used by ~~the ***insured***~~***you*** for the purpose of instruction.
   b. to ***bodily injury*** to any pupil arising out of corporal punishment administered by or at ~~the~~***your*** direction ~~of the ***insured***.~~

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