Sadler Sports: SODA

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/ DD/ YYYY) 03/03/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT NAME: Sports Dept PRODUCER SADLER & COMPANY, INC. PHONE (A/ C, No. Ext): 800-622-7370 | FAX (A/ C, No): 803-256-4017 P.O. BOX 5866 E- MAIL ADDRESS: soda@sadlersports.com COLUMBIA, SOUTH CAROLINA 29250-5866 PRODUCER CUSTOMER ID# NAIC# **INSURER(S) AFFORDING COVERAGE** INSURED D/ B/ A SPORTSPLEX OPERATORS AND DEVELOPERS ASSOCIATION INSURER A: NATIONAL CASUALTY COMPANY Danbury Rays INSURER B: NATIONWIDE LIFE INSURANCE COMPANY 189 Kimberly Lane Woodbury, CT 06798 INSURER C: Club #: 31841 INSURER D:

COVERAGES CERTIFICATE NUMBER REVISION NUMBER

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSD LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/ DD/ YYYY)	POLICY EXP (MM/ DD/ YYYY)	LIMITS	
A A	GENERAL LIABILITY ☐ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS MADE ☐ OCCUR ☐ — — — — — — — — — — — — — — — — — —	INSR	WVD	KRO0000005911700	04:30PM ET 03/03/2016	12:01AM ET 03/03/2017	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MEDICAL EXPENSES (other than participants) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS- COMP/ OP AGG	\$2,000,000 \$1,000,000 \$5,000 \$2,000,000 NONE \$2,000,000
	OTHER AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON- OWNED AUTOS						COMBINED SINGLE LIMIT (Ea Accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	
С	□ UMBRELLA LIAB □ □ OCCUR ■ EXCESS LIAB □ CLAIMS- MADE □ DEDUCTIBLE □ RETENTION			n/ a	n/ a	n/ a	EACH OCCURRENCE AGGREGATE	n/ a
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE Y/ N OFFICER / MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			N/ A			PER STATUE OTHER E.L. EACH ACCIDENT E.L. DISEASE - EA EOMPLOYEE E.L. DISEASE - POLICY LIMIT	
В	PARTICIPANT ACCIDENT			JXS00000027218600- A	04:30PM ET 03/03/2016	12:01AM ET 03/03/2017	EXCESS MEDICAL AD&D	\$100,000 \$5,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
The General Liability policy, if included above, is part of the ERS Risk Purchasing Group Association, Inc.

RE: COVERED Team(s) - Adult - Accident & General Liability

Baseball - 1 Team(s) - [Maximum 20 players per team]

Team Names: Danbury Rays

(Adult Team Accident As Part of Package: \$100,000 Excess Medical; \$5,000 Accidental Death or Dismemberment; \$500 per claim deductible; Physical Therapy & . Chiropractic Visits - 5 Visits Maximum @ \$50 Per Visit; Hospitalization - Inpatient & Outpatient - \$1,000 Maximum; Surgeon's Benefits - \$2,500 Maximum; Anesthesia And Assistant Surgeon - Maximum of 25% Surgeon's Benefits; Emergency Room - \$500 Maximum; Physician Visits - \$50 Maximum Per Visit) (Adult Team General Liability as Part of Package: \$2,000,000 Each Occurrence; \$2,000,000 Legal Liability to Participants; Waiver/ Release Recommended) NOTE: The Participant Accident policy, if included above, is not a part of the ERS Risk Purchasing Group Association, Inc.

CERTIFICATE HOLDER

CANCELLATION

EVIDENCE OF COVERAGE

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE (company A)

Scott hurburs

AUTHORIZED REPRESENTATIVE (company B)

Coverage is only extended to U.S. events and activities
***NOTICE TO TEXAS INSUREDS: The Insurer for the purchasing group may not be subject to all the insurance laws and regulations of the State of Texas.

ACORD 25 (2014/01)

© 1988-2014 ACORD CORPORATION. All rights reserved.