Sadler Sports: SODA

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/ DD/ YYYY) 03/12/2019

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).

· · · · · · · · · · · · · · · · · · ·	. ,				
PRODUCER	CONTACT NAME: Sports Dept				
SADLER & COMPANY, INC. P.O. BOX 5866 COLUMBIA, SOUTH CAROLINA 29250-5866	PHONE (A/ C, No. Ext): 800-622-7370 FAX (A/ C, No): 803-256-4017				
	E- MAIL ADDRESS: soda@sadlersports.com				
	PRODUCER CUSTOMER ID#:				
INSURED D/ B/ A SPORTSPLEX OPERATORS AND DEVELOPERS ASSOCIATION Utah Cricket Association, Inc P.O. Box 57723	INSURER(S) AFFORDING COVERAGE	NAIC#			
	INSURER A: NATIONAL CASUALTY COMPANY				
	INSURER B: NATIONWIDE LIFE INSURANCE COMPANY				
Murray, UT 84157	INSURER C: NATIONAL CASUALTY COMPANT				
Club #: 53070	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	
Α	GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS MADE OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PROJECT LOC OTHER			KRO0000007734200	12:01AM ET 03/13/2019	12:01AM ET 03/13/2020	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
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON- OWNED AUTOS			KRO0000007734200	12:01AM ET 03/13/2019	12:01AM ET 03/13/2020	COMBINED SINGLE LIMIT (Ea Accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	\$1,000,000
А	SEXUAL ABUSE / MOLESTATION			n/ a	n/ a	n/ a	EACH OCCURRENCE AGGREGATE	\$1,000,000
С	UMBRELLA LIAB ☐ OCCUR EXCESS LIAB ☐ CLAIMS- MADE ☐ DEDUCTIBLE ☐ RETENTION			XKO0000007734300	12:01AM ET 03/13/2019	12:01AM ET 03/13/2020	EACH OCCURRENCE AGGREGATE	\$3,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE			N/ A			☐ PER STATUE ☐ OTHER E.L. EACH ACCIDENT E.L. DISEASE - EA EOMPLOYEE E.L. DISEASE - POLICY LIMIT	
В	PARTICIPANT ACCIDENT			BAX0000030329900- A	12:01AM ET 03/13/2019	12:01AM ET 03/13/2020	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

Cricket - 8 Team(s) - [Maximum 20 players per team]
Team Names: Vincent Hawks, Falcons, Utah Lions, Gladiators, Salt Lake Royals, Salt Lake Knights, Ogden Jaguars, Bind It
(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: \$5,000,000 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 hurbust

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.