



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/ DD/ YYYY)
05/16/2022

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 SADLER & COMPANY, INC. P.O. BOX 5866 COLUMBIA, SOUTH CAROLINA 29250-5866	CONTACT NAME: Sports Dept PHONE (A/ C, No. Ext): 800-622-7370 FAX (A/ C, No): 803-256-4017 E-MAIL ADDRESS: amateur@sadlersports.com PRODUCER CUSTOMER ID#:														
	<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: NATIONWIDE INSURANCE COMPANY</td> <td></td> <td>38970</td> </tr> <tr> <td>INSURER B:</td> <td></td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A: NATIONWIDE INSURANCE COMPANY		38970	INSURER B:			INSURER C:			INSURER D:	
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INSURED NASSAU COUNTY GIRLS 225 MINEOLA AVE CARLE PLACE, NY, NY 11514 Application ID: 354924 A Member of the Sports, Leisure & Entertainment RPG															

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	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC			6B RPG0000007785600	10:56AM ET 05/16/2022	12:01AM ET 05/16/2023	EACH OCCURRENCE \$1,000,000 DAMAGE TO PREMISES RENTED TO YOU (Fire Legal Liability) \$1,000,000 PROFESSIONAL LIABILITY \$1,000,000 MEDICAL EXPENSES (other than participants) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE (other than Products- completed Operations) \$5,000,000 PRODUCTS- COMP/ OP AGG \$1,000,000 LEGAL LIAB TO PARTICIPANTS \$1,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS (not provided while in Hawaii) <input checked="" type="checkbox"/> NON- OWNED AUTOS (not provided while in Hawaii)			6B RPG0000007785600	10:56AM ET 05/16/2022	12:01AM ET 05/16/2023	COMBINED SINGLE LIMIT (Ea Accident) \$1,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS- MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION						EACH OCCURRENCE AGGREGATE
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER / MEMBER EXCLUDED? <input type="checkbox"/> (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			N/A			<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT E.L. DISEASE - EA EEMPLOYEE E.L. DISEASE - POLICY LIMIT
A	MEDICAL PAYMENTS TO PARTICIPANTS			6B RPG0000007785600	10:56AM ET 05/16/2022	12:01AM ET 05/16/2023	EXCESS MEDICAL \$25,000 AD&D NONE DEDUCTIBLE \$100

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
RE: COVERED SPORTS UMPIRES/ Referees Assoc. for Class C Sports 20 & Over,
 High Brain Injury Sports - For Deck/ Floor/ Field/ Street Hockey, Flex Football (age 19 & under), Roller Hockey (quad), Cheerleading (age 19 & under); Lacrosse (age 19 & under); Tackle and contact football (age 19 & under), Soccer (age 19 & under), Water Hockey (age 19 & under), Wrestling (age 19 & under), and Umpire/ Referee Associations for the above High Risk Concussion Sports, Limited Coverage for "Brain Injury" endorsement applies- Brain Injury Limit: \$1,000,000 occurrence/ \$1,000,000 aggregate; Brain Injury Loss Adjustment Expense Limit: \$1,000,000 occurrence/ \$1,000,000 aggregate. "Brain Injury" means concussion, chronic traumatic encephalopathy, or any other injury to the brain and any symptoms, conditions, disorders and diseases, including death, resulting therefrom but only if such injury occurs as a result of specific events occurring during the policy period.

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 

**Amateur Teams / Leagues Online Application
Verification of Coverage**

Application Receipt Date / Time: 05/16/2022 10:58:53 AM - entered by Customer

I. GENERAL INFORMATION

Application ID: 354924

Application Status: Sold

Name of Organization: NASSAU COUNTY GIRLS

Doing Business As:

Type of Organization: association

Form of Business: Other

Client type: renewal

Contact's Name: CAROL O' SULLIVAN

Primary Location Address: 225 MINEOLA AVE

Address 2:

City: CARLE PLACE, NY

State: NY

County:

Postal / Zip Code: 11514

Primary Phone: (516) 712-9155

Secondary Phone: (516) 712-9155

Fax:

Email Address: sulli6@optonline.net

Website:

How did you find out about Sadler & Company: Already buy from Sadler

Do your Property Owners or Sponsors require a Certificate Of Insurance? Yes

Are you seeking coverage for all participants within your organization? Yes

Do any of your teams include both youth athletes (Class B sports) and adult athletes (Class A sports) participating together on the same team? No

Online Agreement and Warranty Statement accepted? Yes

Are you responsible for the ownership, operation or maintenance of a facility or field? No

Are you a municipality or a park and recreation division? No

Do you meet the requirements by not answering Yes to any of the following? Is there any form of player compensation or prize money awarded for participation?, Are you a school sanctioned sports team or league?, Are you a Gymnastics, martial arts, cheer or dance studio?, Are any of your activities held on private residential property?, Does the named insured owns or operates any pools?, Is a member of any of the following: American Amateur Baseball Congress, American Youth Football, Babe Ruth/ Cal Ripken Baseball, Babe Ruth Softball, Dixie Boys Baseball, Dixie Softball, Dixie Youth Baseball, Pop Warner, US Youth Soccer Association, Soccer Association for Youth, USA (SAY Soccer), World Adult Kickball Association (WAKA.)? Yes

If you suspect an athlete has a concussion, do you have a plan that includes:

Immediately removing the athlete from play or practice Yes

Keeping the athlete out of play or practice until they provide written Yes

Does your operation involve tackle or contact flag football/ Flex Football? No

If yes, Do you maintain a system for your tackle/ contact flag football/ Flex Football activities that includes communication (in written or electronic form) of education materials to participants, parents and coaches about the nature of risk of concussions, including but not limited to information such as: focusing on prevention and preparedness to keep athletes safe; understanding concussions and potential consequences of the injury; recognizing concussion symptoms and how to respond; and learning about steps for returning to play after a suspected concussion? No

Note: The Center for Disease Control and Prevention offers free information, as well as a free online concussion training course on their website: www.cdc.gov/concussion/HeadsUp/youth.

Notes:

Organization Affiliation: No Affiliation

Exclusions: The following exclusions are contained in the commercial general liability coverage provided by this program. 24- hour premises liability (unless optional coverage is purchased for sports fields); Abuse, molestation, harassment or sexual conduct; Aircraft/ hot air balloon; Airport; Amusement devices (The ownership, operation, maintenance or use of: any mechanical or non- mechanical ride, slide, or water slide, any inflatable recreational device, any bungee operation or equipment, any vertical device or equipment used for climbing- either permanently affixed or temporarily erected, or dunk tank. Amusement devices do not include any video or computer games or any device that is specifically designed for the training or instruction of the activity for which you are enrolled.); Animals (injury or death to, or injury, death or property damage caused by any animal owned, rented or hired by you); Asbestos; Athletic or sports participants in: Box lacrosse, Broomball, Diving, Dodgeball, Gymnastics, Hurling, Ice hockey, Inline hockey, Inline skating (speed), Flex Football™ (age 20 & over), Judo, Karate, Lacrosse (age 20 & over), Martial arts, Powerlifting (age 20 & over), Ringette, Roller hockey (inline), Taekwondo, Takraw, Umpire/ referee association for Class A Sports, Water hockey (age 20 & over), Water polo (age 20 & over), Weightlifting (age 20 & over), Wrestling (age 20 & over); Babysitting/ child care services; Carnivals/ festivals; Cheer and dance studios; Commercial general liability standard exclusions (CG0001 04/13 edition); Communicable disease; Concerts; Cryogenic chambers/ therapy; Employment- related practices; Events involving gambling (eg: bingo, casino nights, poker, Texas hold'em tournaments); Events where alcoholic beverages are furnished or served by you, your employees or your "volunteer workers"; Fireworks; Fungi or bacteria; Gymnastics studios; Haunted attractions; Intercollegiate & Interscholastic teams, leagues and associations; Lead; Martial arts studios; Non- rostered participants at tournaments hosted by the enrolled member (unless optional coverage is purchased); Nuclear energy liability; Operation, ownership or management of any athletic facility or field, other than while being used for covered activities; Operations of independent concessionaires/ vendors in conjunction with your organization; Performers; Rodeos; Saddle animals; Snowmobile; Sports events/ activities involving participants in sports other than those reported and for whom premium has been paid; Transportation of athletes/ participants; Violation of statutes that govern e- mails, faxes, phone calls or other methods of sending materials or information; Those operations listed as ineligible: Adventure races, Aerobic exercise, Bandy, Biathlon, BMX/ stunt cycling, Boating activities/ sports, Bobsled, Body boarding, Boxing, Canoe, Cheerleading (age 20 & over), Climbing, Cycling, Dance team (age 20 & over), Drill team/ majorette (age 20 & over), Equestrian, Fitness - aerobics and exercise, Hammer throw, Hang gliding, Hostelling, Inline (extreme/ stunt/ aggressive/ free- style) skating, Jai alai, Javelin, Kayaking, Kite surfing, Luge (street), Marathon, Mixed martial arts; Modern pentathlon, Mountain biking and/ or hiking, Mountain boarding, Open water fishing, Open water activities/ sports, Orienteering, Outrigging, Parachute, Parasailing, Physical fitness, Physique (Pose) performance, Polo (horse), Rafting, Rodeo, Roller derby, Rowing/ Crew, Rugby, Sailing, Scuba diving, Shooting sports and/ or hunting, Skateboarding, Skiing (snow or water), Sky diving, Sky surfing, Sled/ Crew dog racing, Snorkeling, Snow boarding, Snow surfing, Soccer (age 20 & over), Sports parachuting, Strength and conditioning, Streetball, Surfing (including boogie boards), Tackle and contact football (age 20 & over), Trampoline, Trapeze, Triathlon, Umpire/ Referee associations involved with any ineligible sports operations, Unicycling, Wake boarding, Wind surfing, Wrestling (professional), Yachting

II. AGENT INFORMATION

Agency Name: Eileen Abraham Insurance Agency

License Agent Name: Eileen Abraham

Person Completing Application: Jimm Paul

Sadler Sports: Amateur Teams / Leagues Insurance Plan

Primary Location Address: 111-02a Farmers Blvd
 Address 2:
 City: Saint Albans
 State: NY
 Postal / Zip Code: 11412
 Phone: (718) 454-2022
 Fax:
 Email Address: eia@eabrahaminsurance.net

III. MEDICAL PAYMENTS TO PARTICIPANTS / GENERAL LIABILITY INSURANCE

NATIONWIDE INSURANCE COMPANY
 Policy Number 6B RPG0000007785600
 Effective Date 10:56AM ET 05/16/2022
 Expiration Date 12:01AM ET 05/16/2023

COVERAGE EFFECTIVE DATE: Coverage begins the exact time and date that this electronic application and internet check is received at Sadler & Company or a future effective date if requested, whichever is later and continues for one full year from the effective date.

Limits	\$25,000 Medical Payments to Participants / \$1,000,000 General Liability
Medical Payments to Participants Deductible	\$100.00
Medical Payments to Participants Plan	Full Excess

NOTE:

- **Class C - High Risk Brain Injury Sports** - For Deck/ Floor/ Street Hockey, Field Hockey, Flex Football (age 19 & under), Roller Hockey (quad), Cheerleading (age 19 & under); Lacrosse (age 19 & under); Tackle and contact football (age 19 & under), Soccer (age 19 & under), Water Hockey (age 19 & under), Wrestling (age 19 & under), and Umpire/ Referee Associations for the above High Risk Concussion Sports, Limited Coverage for "Brain Injury" endorsement applies- Brain Injury Limit: \$1,000,000 occurrence/ \$1,000,000 aggregate; Brain Injury Loss Adjustment Expense Limit: \$1,000,000 occurrence/ \$1,000,000 aggregate. "Brain Injury" means concussion, chronic traumatic encephalopathy, or any other injury to the brain and any symptoms, conditions, disorders and diseases, including death, resulting therefrom but only if such injury occurs as a result of specific events occurring during the policy period.

Sports / Participants

Sports	Age Groups	# of Participants	Totals
Umpires/ Referees Assoc. for Class C Sports	20 & Over	140	\$1,393.00 (\$9.95 per participant)
Totals			\$1,393.00 (\$1393 min. premium)

Limits	(minimum premium charges may apply)	Charges
	\$25,000 Medical Payments to Participants / \$1,000,000 General Liability	\$1,393.00
	24hr Premises Liability Coverage (Not Covered Unless Premium Accepted - Subject to Underwriting Approval)	\$0.00
\$1,000,000	Additional Coverage: Directors & Officers Liability	\$315.00
	State Surplus Lines Tax/ Surcharge	\$0.00
	Additional Coverage: Crime	Not Covered
	State Surplus Lines Tax/ Surcharge	\$0.00
\$0	Additional Coverage: Equipment	Not Covered
	State Surplus Lines Tax/ Surcharge	\$0.00
	NSLPA Membership Fee	\$5.00
	Risk Purchasing Group Membership Fee (required)	\$15.00

TOTAL CHARGES: \$1,728.00

IV. 24HR PREMISES LIABILITY COVERAGE

Do you meet the requirements by not falling under any of the following? No
 You are a school sanctioned sports team or league. | You are a gymnastics, martial arts, cheer or dance studio or gym. | You are a municipality or a park and recreation division. | Your organization has activities held on private residential property. | You own, operate or maintain a pool/ pool on the outdoor premises for which you are applying for this coverage.

Number of Fields: 0
 Number of Acres for Athletic Fields: 0

Location of the fields
 Primary Location Address:
 Address 2:
 City:
 State:
 Postal / Zip Code:

V. CERTIFICATES OF INSURANCE

Sadler Sports: Amateur Teams / Leagues Insurance Plan

The certificate holder is added as an additional insured, but only with respect to the liability arising out of the operations of the insured above.

LIST OF PREVIOUSLY ADDED FACILITY OWNERS AND SPONSORS	Action
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VI. ADDITIONAL COVERAGES

Additional Coverages are effective only upon final underwriting and acceptance by the carrier. If effective, all Additional Coverages expire one year after effective date.

Directors & Officers Liability (\$1,000,000 limit, \$1,000 deductible)

Policy Number:
Effective Date:
Carrier: NATIONWIDE INSURANCE COMPANY

Cyber Privacy & Client Identity Theft: Network Remediation - \$5,000 / loss or theft of client personal information - \$2,500 per person with \$25,000 aggregate

Annual Revenue: 1000

Number of Employees: 0

Number of Volunteers: 0

Did your sports organization purchase a D & O Policy LAST YEAR from an insurance agency OTHER THAN Sadler & Company? No

Has there been any claim made, or is there any now pending, against any corporation or persons proposed for this insurance? No
details:

Has any claim that would fall within the scope of the proposed insurance been made against any person or entity proposed for this insurance (including without limitation any claim against such person or entity for any employment practice, as described in the proposed insurance, or any complaint against any such person or entity before the Equal Employment Opportunity Commission or any similar state or local authority), except as follows (include the loss payment and defense cost)? If so, give details: No
details:

Has any person or entity proposed for this insurance is cognizant of any fact, circumstance or situation (including without limitation any suspected or threatened claim against any such person or entity for any employment practice, as described in the proposed insurance, or any suspected or threatened complaint against any such person or entity before the Equal Employment Opportunity Commission or any similar state or local authority) which might afford grounds for any claim that would fall within the scope of the proposed insurance? If so, give details: No
details:

Premium Accepted: Pending Approval
Cyber Privacy & Client Identity Theft:
NSLPA Membership Fee:
Notes:

Crime Insurance - NOT APPLIED FOR

Equipment Coverage - NOT APPLIED FOR

Summary of Declined Additional

VII. POLICY PERIOD CHANGES

Sadler & Company, Inc. * P.O. Box 5866 * Columbia, SC 29250-5866
Phone: 1-800-622-7370 * Fax: (803) 256-4017 * Email: amateur@sadlersports.com