

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

100363-001
8/13/2008

PRODUCER
Aon Association Services a division of Affinity Insurance Services Inc.
1120 20th Street, NW, Suite 600
Washington, DC 20036
800-432-7465

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW

INSURED
National Recreation & Park Association
Coeur d'Alene Junior Tackle Football
4304 Laurel Avenue
Coeur D Alene
ID 83815

COMPANIES AFFORDING	
COMPANY A	Lexington Insurance Company
COMPANY B	AIG Life Insurance Company
COMPANY C	
COMPANY D	

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH 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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNER S & CONTRACTOR S PROT	4194565-02	7/01/2008	7/01/2009	GENERAL AGGREGATE \$ 4,000,000
	PRODUCTS - COMP/OP AGG \$ 2,000,000				
	PERSONAL & ADV INJURY \$ 2,000,000				
	EACH OCCURRENCE \$ 2,000,000				
	FIRE DAMAGE (Any one fire) \$ 300,000				
	MED EXP (Any one person) \$ 5,000				
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				
				BODILY INJURY (Per person) \$	
				BODILY INJURY (Per accident) \$	
				PROPERTY DAMAGE \$	
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$
					OTHER THAN AUTO ONLY: \$
					EACH ACCIDENT \$
					AGGREGATE \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$
					AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY <input type="checkbox"/> INCL <input type="checkbox"/> EXCL THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: OTHER				WC STATUTORY LIMITS \$
					OTHER \$
					EL EACH ACCIDENT \$
					EL DISEASE - POLICY LIMIT \$
					EL DISEASE - EA \$
	A Participant Legal Liability	Limit 4194565-02	7/01/2008	7/01/2009	\$2,000,000
	B Excess Accident Medical	SRG8069298	7/01/2008	7/01/2009	\$250,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
The Certificate Holder is added as an Additional Insured with respect to the sole negligence of the named insured with regard to the sanctioned activities of the insured during the authorized period of use of the recreational facility

CERTIFICATE HOLDER

Cert#: 100363-001 1

Person Field
1500 Garden
Coeur D Alene
ID 83815

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY

AUTHORIZED REPRESENTATIVE

