

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/30/2022

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 have ADDITIONAL INSURED provisions or 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).

this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).						
PRODUCER		CONTACT NAME:				
Bene-Marc, Inc. 6301 Southwest Blvd., Suite 101		PHONE (A/C, No, Ext):	(800) 247-1734	FAX (A/C, No): (817)	738-1811	
Fort Worth, TX 76132-1063		E-MAIL ADDRESS: contact@bene-marc.com				
(800) 247-1734			NAIC#			
,		INSURER A :	AA-1120822			
INSURED	. ,.	INSURER B :	37273			
Northville Baseball/Softball Associated PO Box 147	ciation	INSURER C:				
Northville, MI 48167		INSURER D :				
rtorarimo, im 1616.		INSURER E:				
		INSURER F:				
COVERAGES	CERTIFICATE NUMBER: 5439-533	20-248165	REVISION NUI	MBER:		
THIS IS TO CERTIFY THAT THE PO	LICIES OF INSURANCE LISTED BELOW HA	VE BEEN ISS	UED TO THE INSURED NAMED ABOV	E FOR THE PO	LICY PERIOD	

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.

INSR	NSR ADDLISUBR POLICY ESF POLICY EXP							
LTR		TYPE OF INSURANCE		WVD		(MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS
Α	X	COMMERCIAL GENERAL LIABILITY	Х	18LB3869-53320	1/1/2023	1/1/2024	EACH OCCURRENCE \$ 1,000,000.00	
		CLAIMS-MADE X OCCUR	^ `					DAMAGE TO RENTED \$ 100,000.00
	X	INCLUDES Participant Legal						MED EXP (Any one person) \$ 5,000.00
		Liability						PERSONAL & ADV INJURY \$ 1,000,000.00
	GEN	N'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 5,000,000.00
		POLICY PRO- LOC						PRODUCTS - COMP/OP AGG \$ 2,000,000.00
		OTHER:						* Medical Exp for Spectators Only
	AUT	TOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
		ANY AUTO						BODILY INJURY (Per person) \$
		OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident) \$
		HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$
								\$
Α		UMBRELLA LIAB X OCCUR			18EX2653-53320	1/1/2023	1/1/2024	EACH OCCURRENCE \$ 2,000,000.00
	X	EXCESS LIAB CLAIMS-MADE						AGGREGATE \$ 2,000,000.00
		DED RETENTION\$						\$
		RKERS COMPENSATION EMPLOYERS' LIABILITY						PER OTH- STATUTE ER
	ANY	PROPRIETOR/PARTNER/EXECUTIVE   T / N	N/A					E.L. EACH ACCIDENT \$
	(Mar	ICER/MEMBER EXCLUDED?	117 A					E.L. DISEASE - EA EMPLOYEE \$
	If yes	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT \$
В	Ex	cess Accident Medical			SRPO-30000-4000-0797	1/1/2023	1/1/2024	Limit 100,000.00 / Deductible 250.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
This policy includes a blanket additional insured endorsement that provides additional insured status to the certificate holder per form CG 20 26 07/04.

Coverage Applies to Activities: Youth Baseball, T-Ball, Softball League.

Abuse or Molestation Coverage - Each Incident Limit \$1,000,000, Aggregate Limit \$2,000,000.

Coverage for Sports Equipment - Policy # 17IM1530-53320 \$20,000.00 limit with a \$500.00 deductible.

<b>CERTIFICATE HOLDER</b> 5439-53320-248165	CANCELLATION
Athletx Sports Group LLC 11221 Plantside Dr. Louisville, KY 40299	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
1	AUTHORIZED REPRESENTATIVE ALL ANYMOU HALL

© 1988-2015 ACORD CORPOR TION. All rights reserved.