ACORD	

CERTIFICATE OF LIABILITY INSURANCE

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

•									_	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).														
PRODUCER CONTACT														
Bene-Marc, Inc.						PHONE (A/C, No, Ext): (800) 247-1734 FAX (A/C, No): (817) 738-1811								
6301 Southwest Blvd., Suite 101 Fort Worth, TX 76132-1063						E-MAIL ADDRESS: contact@bene-marc.com								
(800) 247-1734						INSURER(S) AFFORDING COVERAGE					NAIC #			
						INSURER A : HDI Global Specialty SE					AA-1120822			
INSURED						INSURER B : AXIS Insurance Company					37273			
	Northville Baseball/Softball Association PO Box 147						INSURER C :							
Northville, MI 48167						INSURER D :								
						INSURE	RE:							
						INSURE								
					NUMBER: 5439-5332				REVISION NUMBER:					
IN C	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 LTR		TYPE OF INSURANCE		SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	6				
	X	COMMERCIAL GENERAL LIABILITY	X		18LB3869-53320		1/1/2023	1/1/2024		\$	1,000,000.00			
		CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000.00			
А	Х	INCLUDES Participant Legal							MED EXP (Any one person)	\$	5,000.00			
~		Liability							PERSONAL & ADV INJURY	Ŷ	1,000,000.00			
	GEN								GENERAL AGGREGATE		5,000,000.00			
		POLICY PRO- JECT LOC								•	2,000,000.00			
		OTHER:							* Medical Exp for Spec COMBINED SINGLE LIMIT		s Only			
	AUT								(Ea accident)	\$				
		ANY AUTO							· · · /	\$ \$				
	-	AUTOS ONLY AUTOS HIRED NON-OWNED							PROPERTY DAMAGE	\$ \$				
	-	AUTOS ONLY AUTOS ONLY							(Per accident)	\$				
		UMBRELLA LIAB X OCCUR			18EX2653-53320		1/1/2023	1/1/2024			2,000,000.00			
А	X	EXCESS LIAB CLAIMS-MADE				10EA2000-00020	20	0	0	1/1/2023	1/1/2024		-	2,000,000.00
	-	DED RETENTION \$							\$					
		RKERS COMPENSATION EMPLOYERS' LIABILITY							PER OTH- STATUTE ER					
	ANY	PROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT	\$				
	(Mar	ndatory in NH)							E.L. DISEASE - EA EMPLOYEE	\$				
	DES	s, describe under CRIPTION OF OPERATIONS below								\$				
В	Ex	cess Accident Medical			SRPO-30000-4000-0	797	1/1/2023	1/1/2024	Limit 100,000.00 / Dec	luctibl	e 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.														
CE	RTIF	FICATE HOLDER 5439-53320	-248	186		CAN	CELLATION							
		Point Park, LLC												
1 Cedar Point Drive Sandusky, OH 44870						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										Ha	ll			

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