

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/04/2025

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

	ficate holder in lieu of such endors	SCIIIC	nu(S)	·	CONTAC	CT			
PRODUCER License # OE67789					NAME:				
BENE-MARC ATHLETIC INSURANCE AGENCY					PHONE (A/C, No, Ext): (800)247-1734 FAX (A/C, No): (817) 738-1811 E-MAIL ADDRESS: SpecialEvents@Bene-Marc.com				
6301 Southwest Blvd, Suite 101					INSURER(S) AFFORDING COVERAGE NAIC #				
Fort Worth, Texas 76132					INSURER A: HDI Global Specialty SE				NAIC#
INSURED					INSURER B: AXIS Insurance Company				
Tenant Users of Bene-Marc Special Event Insurance Program					INSURER C: HDI Global Specialty SE				
Bene-Marc Special Event Insurance Services, LLC					INSURER D:				
•					INSURER E :				
Tri County Adult Soccer League - Randall Dahme					INSURER F:				
				NUMBER: Cert# 9071-5				REVISION NUMBER:	N IOV DEDICE
INDIC CER ⁻ EXCL	IS TO CERTIFY THAT THE POLICIES CATED. NOTWITHSTANDING ANY RETIFICATE MAY BE ISSUED OR MAY LUSIONS AND CONDITIONS OF SUCH	EQUIR PERT POLIC	EMEI AIN, CIES.	NT, TERM OR CONDITION (THE INSURANCE AFFORDE LIMITS SHOWN MAY HAVE (OF ANY	CONTRACT THE POLICIES REDUCED BY	OR OTHER I S DESCRIBEI PAID CLAIMS	DOCUMENT WITH RESPECT TO HEREIN IS SUBJECT TO ALL	WHICH THIS
INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
_	GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY			18LB7180		01/01/2025 0		EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$	1,000,000.00
	CLAIMS-MADE X OCCUR							MED EXP (Any one person) \$	5,000.00
X	Excludes Participant Legal Liability			0 141 255	,	. ,		PERSONAL & ADV INJURY \$	1,000,000.00
	for Athletic or Sports Participants			Sexual Abuse/Molestation C				GENERAL AGGREGATE \$	5,000,000.00
GI	EN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO- JECT LOC			with a limit of \$50,000 per C	Occurrer	nce/\$100,000 A	Aggregate.	PRODUCTS - COMP/OP AGG \$	2,000,000.00
Al	JTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident) \$	
	ANY AUTO							BODILY INJURY (Per person) \$	
	ALL OWNED SCHEDULED AUTOS NON-OWNED							BODILY INJURY (Per accident) \$	
	HIRED AUTOS NON-OWNED AUTOS							PROPERTY DAMAGE (Per accident) \$	
								\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE \$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE \$	
w	DED RETENTION S ORKERS COMPENSATION							WC STATU- OTH-	
	ND EMPLOYERS' LIABILITY NY PROPRIETOR/PARTNER/EXECUTIVE // N							TORY LIMITS ER E.L. EACH ACCIDENT \$	
OF	FFICER/MEMBER EXCLUDED?	N/A						E.L. DISEASE - EA EMPLOYEE \$	
lf v	yes, describe under ESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT \$	
	hird Party Property Damage			18LB7180		01/01/2025	01/01/2026	\$1,000,000.00 limit/ \$1,000.0	0 deductible
DESCRI	PTION OF OPERATIONS / LOCATIONS / VEHIC	I EQ /	ttach	ACORD 101 Additional Remarks 6	Schodul-	if more chass !=	roquirod)		
PLOCKI		•		•		•	• /	olunteers are added to this poli	cy as
additio	Brook Board of Education including nal insured, as their interests may ap Tri County Adult Soccer League - F	pear.	ll Da	hme to be held 03/15/2025	5 - 12/3	1/2025 at Gro	een Brook Bo	oard of Education.	
additio	nal insured, as their interests may ap	pear. landa				1/2025 at Gro	een Brook Bo	oard of Education.	
addition Event:	nal insured, as their interests may ap Tri County Adult Soccer League - F	pear. Randa			CANC SHO THE	ELLATION ULD ANY OF 1 EXPIRATION	THE ABOVE D	escribed policies be cance ereof, notice will be deep provisions.	
additio Event: CERT GREEN	nal insured, as their interests may ap Tri County Adult Soccer League - F	pear. Randa			SHO THE ACC	ELLATION ULD ANY OF 1 EXPIRATION	THE ABOVE D I DATE THE TH THE POLIC	ESCRIBED POLICIES BE CANCE EREOF, NOTICE WILL BE D	