

**CERTIFICATE OF INSURANCE
SPECIAL EVENT LIABILITY GROUP INSURANCE**

FACILITY OWNER: (ADDITIONAL INSURED)		PRODUCER:	NO. DR (2010/2011) OS- CA License #0757776
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EVENT HOLDER: (NAMED INSURED)	EVENT INFORMATION		
	TYPE:		
	DATE(S):		
	LOCATION:		
	ATTENDANCE:	CLASS:	

This is to certify that the policies of insurance listed below have been issued to the insured named above for the event date(s) indicated above. 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.

INSURER:	INSURER A:
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INSR LTR	Type of Insurance	Policy Number	Effective	Expiration	Policy Limits
A	Primary Commercial General Liability				Each Occurrence \$1,000,000
2				3	Damage To Premises Rented to You \$500,000
					Medical Payments \$5,000
					Personal & Advertising Injury \$1,000,000
					General Aggregate \$2,000,000
					Products/Completed Operations Aggregate \$2,000,000

COVERAGE TERMS:

Occurrence Form (CG 001.0)	The coverage afforded by this insurance is primary and not contributing with any insurance held by the "ADDITIONAL INSURED", WHEN REQUIRED BY WRITTEN CONTRACT. The limits of insurance apply separately to each event insured by this policy as if a separate policy of insurance has been issued for that event. Who is an insured is amended to include as an additional insured the "Facility Owner - Additional Insured" above and any person or organization shown in the schedule below. This insurance does not apply to: any "occurrence" which takes place after the event holder ceases to be a tenant in that premises. This insurance applies only to: an "occurrence" which takes place during the dates indicated under "Event Information" above.
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All participants in athletic activities are required to sign Release and Waiver of Liability forms.

COVERAGE EXCLUSIONS: (REFER TO POLICY FOR COMPLETE LISTING OF EXCLUSIONS)

-- Sexual Abuse & Molestation
-- Terrorism

Specific Events are excluded from coverage. Please see second page for list of excluded events.

On behalf of the Risk Purchasing Group and each member, the trustee has declined coverage for the Terrorism Risk Insurance Act (TRIA).

OTHER ADDITIONAL INSURED:

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CANCELLATION: Should the above described policy(s) be canceled before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the insured event holder and additional insureds listed.

AUTHORIZED REPRESENTATIVE:	DATE ISSUED:
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