CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/06/2022

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 LIC #40558248 314-304-4894
Player's Health Cover USA Inc.

718 Washington Ave North #402

Minneapolis, MN 55401 USA

CONTACT NAME:
PHONE (A/C, No, Ext):
FAX (A/C, No):
E-MAIL ADDRESS: certificates@playershealth.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : EVEREST NATL INS CO	10120
INSURER B : GREAT AMER INS CO	16691
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Tennessee State Soccer Association

237 Castlewood Drive Suite H,

Murfreesboro, TN 37921 USA

COVERAGES **CERTIFICATE NUMBER:** 535326343 **REVISION NUMBER:**

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	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY	X		SI8GL01834-221	08/01/22	08/01/23	EACH OCCURRENCE	$ 1000000
	CLAIMS-MADE / OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 300000
	X Includes PLL						MED EXP (Any one person)	$ 0
							PERSONAL & ADV INJURY	$ 1000000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 5000000
	X POLICY / PRO-JECT / LOC						PRODUCTS - COMP/OP AGG	$ 1000000
	OTHER:						Partic Legal Liab	$ 1,000,000
A	AUTOMOBILE LIABILITY			SI8GL01834-221	08/01/22	08/01/23	COMBINED SINGLE LIMIT (Ea accident)	$ 1000000
	ANY AUTO						BODILY INJURY (Per person)	$
	OWNED AUTOS ONLY / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY / X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
A	UMBRELLA LIAB / X OCCUR			SI8EX01699-221	08/01/22	08/01/23	EACH OCCURRENCE	$ 5000000
	X EXCESS LIAB / CLAIMS-MADE						AGGREGATE	$ 5000000
	DED / RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N						PER STATUTE / OTH-ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N / A					E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$
A	Abuse and Molestation	X		SI8GL01834-221	08/01/22	08/01/23	Per Occurrence	1000000
B	Participant Accident Med.	X		E426831-01	08/01/22	08/01/23	Per Injury	100,000
A	Abuse & Molestation			SI8GL01834-221	08/01/22	08/01/23	Aggregate	2000000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Operations of the Tennessee State Soccer Assn, its teams, leagues & clubs. Coverage applies only to official, sanctioned and approved activities of FYSA. Certificate holder has automatic additional insured status when required direct written contract.
SUPERCEDES ALL PRIOR CERTIFICATES ISSUED.
The certificate is issued on behalf of: Montgomery County Soccer Association (MCSA)

CERTIFICATE HOLDER

Hilldale Family Life Center

250 Old Farmers Rd

Clarksville, TN 37043 USA

CANCELLATION

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

Christopher Pesigan

© 1988-2015 ACORD CORPORATION. All rights reserved.