



CERTIFICATE OF LIABILITY INSURANCE

DATE: (MM/DD/YYYY)
11/29/2017

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 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).

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| PRODUCER Frazier Insurance Agency, Inc. P.O. Box 1250 Midlothian, VA 23113-1250 | CONTACT NAME Frazier Insurance Agency, Inc. |
| | PHONE (A/C, No Ext) (804) 754-7610 FAX (A/C No) (804) 754-7613 |
| | E-MAIL ADDRESS ifrazier@frazierinsurance.com |
| | INSURER(S) AFFORDING COVERAGE NAIC # |
| | INSURER A Aegis Security Insurance Company 33898 |
| INSURED Sports and Special Event Risk Purchasing Group, Inc. American Volkssport Association, Inc. (AVA) 1001 Pat Booker Road, Suite 101 Universal City, TX 78148 | INSURER B: |
| | INSURER C: |
| | INSURER D: |
| | INSURER E: |
| | INSURER F: |

COVERAGES CERTIFICATE NUMBER: 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

| ISR | TYPE OF INSURANCE | ADDL INSR | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|-----|--|---|----------|--|-------------------------|-------------------------|--|
| A | GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> INCLUDES ATHLETIC PARTICIPANTS GENL AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC | | | Policy # FGLSP-100 Cert #FTX-S-0001 | 01/01/2018 | 01/01/2019 12:01 AM | GENERAL AGGREGATE \$ 2,000,000.00 |
| | | PRODUCTS - COMP/OP AGG \$ 2,000,000.00 | | | | | |
| | | PERSONAL & ADV INJURY \$ 1,000,000.00 | | | | | |
| | | EACH OCCURRENCE \$ 1,000,000.00 | | | | | |
| | | DAMAGE TO RENTED PREMISES \$ 300,000.00 | | | | | |
| | | MED EXP (Any one person) \$ 5,000.00 | | | | | |
| | | \$ | | | | | |
| | AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS HIRED AUTO SCHEDULED AUTOS NON-OWNED AUTOS | | | | | | COMBINED SINGLE LIMIT (Ea accident) \$ |
| | | | | | | | BODILY INJURY (Per person) \$ |
| | | | | | | | BODILY INJURY (Per accident) \$ |
| | | | | | | | PROPERTY DAMAGE (Per accident) \$ |
| | | | | | | | \$ |
| | UMBRELLA LIAB EXCESS LIAB DED RETENTION \$ | | | | | | EACH OCCURRENCE \$ |
| | | | | | | | AGGREGATE \$ |
| | | | | | | | \$ |
| | | | | | | | \$ |
| | | | | | | | \$ |
| A | Excess Accident Medical | | | FR0122 | 01/01/2018 | 01/01/2019 12:01 AM | LIMIT \$ 10,000.00 AD&D \$ 2,500.00 DEDUCTIBLE \$ 100.00 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM

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| CERTIFICATE HOLDER American Volkssport Association, Inc. (AVA) 1001 Pat Booker Road, Suite 101 Universal City, TX 78148 | 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 <i>John W. Frazier</i> |