

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/10/2009

PRODUCER Gagliardi Insurance Services, Inc. 284 Digital Drive Morgan Hill, CA 95037	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED Rowlett Baseball Association P.O. Box 774 Rowlett, TX 75030	INSURER A: Philadelphia Indemnity Insurance	20281
	INSURER B: Federal Insurance Company	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES


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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR	ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS		
A			GENERAL LIABILITY	PHPK365304	2/1/2009	1/1/2010	EACH OCCURRENCE	\$ 1,000,000	
			<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000	
			<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 5,000	
			<input checked="" type="checkbox"/> Athletic Participants				PERSONAL & ADV INJURY	\$ 1,000,000	
			<input checked="" type="checkbox"/> Abuse & Molestation				GENERAL AGGREGATE	\$ 2,000,000	
			GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG	\$ 1,000,000	
			<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				Participant Legal Liab	\$ 1,000,000	
A			AUTOMOBILE LIABILITY	PHPK365304	2/1/2009	1/1/2010	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
			<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$	
			<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$	
			<input checked="" type="checkbox"/> HIRED AUTOS				PROPERTY DAMAGE (Per accident)	\$	
<input checked="" type="checkbox"/> NON-OWNED AUTOS									
			GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$	
			<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	\$	
							AUTO ONLY: AGG	\$	
			EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$	
			<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$	
			<input type="checkbox"/> DEDUCTIBLE					\$	
			<input type="checkbox"/> RETENTION \$					\$	
								\$	
			WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTHE-R	
			ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$	
			If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$	
							E.L. DISEASE - POLICY LIMIT	\$	
B			OTHER				AD&D/Dental 10,000/3,000	Limit 100,000	
			Pony Baseball Medical				9906-4867	2/1/2009	1/1/2010
B			Pony Baseball Catastrophe Medi	9906-4866	2/1/2009	1/1/2010			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
USSSA - TEXAS IS AN ADDITIONAL NAMED INSURED, BUT ONLY WITH RESPECT TO LIABILITY ARISING OUT OF OPERATIONS OF THE NAMED INSURED. ALL POLICY TERMS AND CONDITIONS APPLY.

CERTIFICATE HOLDER

CANCELLATION

USSSA - Texas 259 Plantation Point Natchitoches, LA 71457-	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE 
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IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.