

**CERTIFICATE OF INSURANCE**

Issue Date (MM/DD/YY) INT  
5/28/2008 8:06:18 PM

**PRODUCER**  
**SADLER & COMPANY, INC.**  
P.O. BOX 5866  
COLUMBIA, SOUTH CAROLINA 29250-5866  
(800) 622-7370  
EMAIL: ayf@sadlersports.com

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.

**INSURED**  
**AMERICAN YOUTH FOOTBALL, INC.**  
**AND AMERICAN YOUTH CHEER AS MEMBERS OF ERS RISK PURCHASING GROUP ASSOC., INC.**  
Central UP Youth Football League, Inc  
c/o Dean Lefebvre  
141 Northview Dr  
Iron Mountain, MI 49801

**COMPANIES AFFORDING COVERAGE**

COMPANY LETTER <b>A</b>	National Casualty Company
COMPANY LETTER <b>B</b>	ACE American Insurance Company

**COVERAGES**

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.



CO. LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
<b>A</b>	<b>General Liability</b> <input checked="" type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made <input checked="" type="checkbox"/> Occurrence <input type="checkbox"/> Owners & Contractors Protection	<b>KRO000000362700</b>	12:01 AM 6/30/2008	12:01 AM 6/30/2009	General Aggregate	NONE
					Products - Comps/Ops Aggregate	\$2,000,000
					Personal & Advertising Injury	\$1,000,000
					Each Occurrence	\$1,000,000
					Fire Damage(Any one fire)	\$300,000
					Medical Expenses (Any one person)	\$5,000
					Participant Legal Liability	\$1,000,000
<b>B</b>	<b>Participant Accident</b>	<b>PTPN01882922</b>	12:01 AM 6/30/2008	12:01 AM 6/30/2009	Excess Medical including dental	\$100,000
					Deductible:	\$100.00 per claim

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS**

**COVERED SPORTS:** Tackle Football Ages 12 & Under, Tackle Football Ages 15 & Under

NOTE: The Participant Accident policy shown above is not a part of the ERS Risk Purchasing Group Association, Inc. With respect to the General Liability, the Certificate Holder is added as an Additional insured solely in its capacity as a property owner or sponsor, but only with respect to liability arising out of the insured's operations. This insurance does not apply to the sole negligence

<b>CERTIFICATE HOLDER</b>  <b>Property Owner</b> Iron Mountain Public Schools 300 West B Street Iron Mountain, MI 49801	<b>CANCELLATION</b>
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATIONS OR LIABILITY OF ANY KIND UPON THE
	AUTHORIZED REPRESENTATIVE (Company A)
	AUTHORIZED REPRESENTATIVE (Company B)

AYF