

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/27/2023

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 liqu of such endorsement(s).

	is certificate does not confer rights to						may require	an endorsement. A state	ament (on	
PRODUCER						CONTACT Sports Commercial					
Sadler & Company, Inc.						PHONE (803) 254-6311 FAX (A/C, No, Ext): (803) 256-4017					
dba ISU-Sadler & Company						E-MAIL sport3@sadlersports.com					
P. O. Drawer 5866						INSURER(S) AFFORDING COVERAGE					
Columbia SC 29250-5866						INSURER A: United States Fire Ins. Co.					
INSURED						INSURER B:					
K9 Frisbee, LLC					INSURER C:						
	3564 Adaline Drive				INSURER D:						
					INSURER E :						
Stow				OH 44224	INSURER F:						
COVERAGES CER			RTIFICATE NUMBER: CL226211953			REVISION NUMBER:					
IN C E	HIS IS TO CERTIFY THAT THE POLICIES OF IDICATED. NOTWITHSTANDING ANY REQUISERTIFICATE MAY BE ISSUED OR MAY PERTAKCLUSIONS AND CONDITIONS OF SUCH PO	REME AIN, TI OLICIE	NT, TE HE INS S. LIM	ERM OR CONDITION OF ANY SURANCE AFFORDED BY THE ITS SHOWN MAY HAVE BEEN	CONTRA E POLICI	ACT OR OTHER ES DESCRIBEI ED BY PAID CL	DOCUMENT \ DHEREIN IS S AIMS.	WITH RESPECT TO WHICH T	HIS		
INSR LTR			SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	_{\$} 1,00	00,000	
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	_{\$} 300,	,000	
								MED EXP (Any one person)	\$ 5,00)0	
Α	Includes Athletic Participants	Y		SRPGAPML-101-0122		06/01/2022	06/01/2023	PERSONAL & ADV INJURY	φ	00,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,00	00,000	
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$ 2,00	00,000	
	OTHER:								\$		
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$		
	ANY AUTO							BODILY INJURY (Per person)	\$		
	OWNED SCHEDULED AUTOS ONLY							BODILY INJURY (Per accident)	\$		
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
									\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE	_						AGGREGATE	\$		
	DED RETENTION \$ WORKERS COMPENSATION							PER OTH-	\$		
	AND EMPLOYERS' LIABILITY Y/N							PER OTH- STATUTE ER	<u> </u>		
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?		N/A						E.L. EACH ACCIDENT	\$		
(Mandatory in NH) If yes, describe under								E.L. DISEASE - EA EMPLOYEE \$			
	DESCRIPTION OF OPERATIONS below	1						E.L. DISEASE - POLICY LIMIT	\$		
DES	 CRIPTION OF OPERATIONS / LOCATIONS / VEHICLI	FS (AC	ORD 1	01. Additional Remarks Schedule.	may be at	tached if more sr	ace is required)				
K9 The	Frisbee Toss and Fetch Events certificate holder has been added as an ad policy period.	•		,	-		. ,	s of the named insured durin	g		
Sch	Scheduled Activities Exclusion Applies-Please Refer to Named Insured Member Certificate of Coverage										
CEI	RTIFICATE HOLDER			CANC	CANCELLATION						
Bristol Township School District 1001 Veterans Hwy						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
1001 Votolano Hwy						AUTHORIZED REPRESENTATIVE					
	Bristol	PA 19007			21	m Tuelly					