



ESTANCIA HIGH SCHOOL
ALL SPORTS BOOSTERS
 Serving Athletics, Arts, and Academics
 across the Estancia Enrollment Zone

Estancia High School All Sports Boosters
 2323 Placentia Avenue
 Costa Mesa, CA 92627

<http://estancia.nmusd.us/ehsasb>
 1.949-515-6508

A SEPARATE LEGAL ENTITY AND INDEPENDENT OF NEWPORT-MESA UNIFIED SCHOOL DISTRICT

California Nonprofit Corporation: #C3494102
 California Attorney General Registry of Charitable Trusts: #CT0197822
 US IRS EIN: #46-0762807
 US IRS 501(c)(3) Tax Exempt: Subordinate Member of Parent Boosters USA's Group Exemption #5271
 California Franchise Tax Board Tax Exempt: Per Revenue and Taxation Code Section 23701d(c)(1)

To: Whom It May Concern
 From: Richard E. Rutledge, President
 Date: 6/7/18
 Re: Estancia High School All Sports Boosters 2018-2019 Member Booster Club Insurance Coverage

The below Member Booster Clubs are legally and financially part of Estancia High School All Sports Boosters with Insurance Coverage as shown below.

Program Information					Insurance Coverage Information	
Member Booster Club	Site	Gender	Teams	Programs	Booster	Sports Camp or School Program
Estancia Baseball Boosters	EHS	Boys	1	0	Yes	Sports Camp
Estancia Softball Boosters	EHS	Girls	1	0	Yes	Sports Camp
Estancia Boys Basketball Boosters	EHS	Boys	1	0	Yes	Sports Camp
Estancia Girls Basketball Boosters	EHS	Girls	1	0	Yes	Sports Camp
Estancia Golf Boosters	EHS	Boys	1	0	Yes	Sports Camp
Estancia Ladies Golf Boosters	EHS	Girls	1	0	Yes	Sports Camp
Estancia Boys Soccer Boosters	EHS	Boys	1	0	Yes	Sports Camp
Estancia Girls Soccer Boosters	EHS	Girls	1	0	Yes	Sports Camp
Estancia Tennis Boosters	EHS	Boys & Girls	2	0	Yes	Sports Camp
Estancia Boys Volleyball Boosters	EHS	Boys	1	0	Yes	Sports Camp
Estancia Girls Volleyball Boosters	EHS	Girls	1	0	Yes	Sports Camp
Estancia Boys Water Polo Boosters	EHS	Boys	1	0	Yes	Sports Camp
Estancia Girls Water Polo Boosters	EHS	Girls	1	0	Yes	Sports Camp
Estancia Swimming Boosters	EHS	Boys & Girls	2	0	Yes	Sports Camp
Estancia Wrestling Boosters	EHS	Boys	1	0	Yes	Sports Camp
Estancia Cross Country Boosters	EHS	Boys & Girls	2	0	Yes	Sports Camp
Estancia Track and Field Boosters	EHS	Boys & Girls	2	0	Yes	Sports Camp
Estancia Aquatics Boosters	EHS	Boys & Girls	0	1	Yes	N/A
Estancia Band Boosters	EHS	Boys & Girls	0	1	Yes	N/A
Australia Education Exchange	EHS	Boys & Girls	0	1	Yes	N/A
Estancia Drama Boosters	EHS	Boys & Girls	0	1	Yes	N/A
Estancia Faculty/Staff Club	EHS	Men & Women	0	1	Yes	N/A
Estancia Youth-and-Government	EHS	Boys & Girls	0	1	Yes	N/A
Estancia Family Support Boosters	EHS	Men & Women	0	1	Yes	N/A

Should you have any questions, please contact myself or one of our EHSASB Board Members via information posted at: <http://estancia.nmusd.us/ehsasb>



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/13/2018

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).

PRODUCER FRANCIS L. DEAN & ASSOCIATES OF CALIFORNIA, LLC PO BOX 91387 LOS ANGELES, CA 90009-1387 (800) 745-2409	CONTACT NAME: <table style="width: 100%; border: none;"> <tr> <td style="border: none;">PHONE (A/C, No, Ext):</td> <td style="border: none;">(800) 745-2409</td> <td style="border: none;">FAX (A/C, No):</td> <td style="border: none;">(424) 646-4998</td> </tr> <tr> <td style="border: none;">E-MAIL ADDRESS:</td> <td colspan="3" style="border: none;">infoca@fdean.com</td> </tr> <tr> <td colspan="3" style="border: none;">INSURER(S) AFFORDING COVERAGE</td> <td style="border: none;">NAIC #</td> </tr> <tr> <td style="border: none;">INSURER A :</td> <td colspan="2" style="border: none;">United States Fire Insurance</td> <td style="border: none;">21113</td> </tr> <tr> <td style="border: none;">INSURER B :</td> <td colspan="3" style="border: none;"></td> </tr> <tr> <td style="border: none;">INSURER C :</td> <td colspan="3" style="border: none;"></td> </tr> <tr> <td style="border: none;">INSURER D :</td> <td colspan="3" style="border: none;"></td> </tr> <tr> <td style="border: none;">INSURER E :</td> <td colspan="3" style="border: none;"></td> </tr> <tr> <td style="border: none;">INSURER F :</td> <td colspan="3" style="border: none;"></td> </tr> </table>	PHONE (A/C, No, Ext):	(800) 745-2409	FAX (A/C, No):	(424) 646-4998	E-MAIL ADDRESS:	infoca@fdean.com			INSURER(S) AFFORDING COVERAGE			NAIC #	INSURER A :	United States Fire Insurance		21113	INSURER B :				INSURER C :				INSURER D :				INSURER E :				INSURER F :			
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COVERAGES **CERTIFICATE NUMBER:** USP272184 **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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	GENERAL LIABILITY			SRPGAPML-101-0717	06/22/2018 12:01 AM	06/22/2019 12:01 AM	GENERAL AGGREGATE	\$3,000,000.00	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY		X				PRODUCTS - COMP/OP AGG	\$3,000,000.00	
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						PERSONAL & ADV INJURY	\$1,000,000.00	
	GEN'L AGGREGATE LIMIT APPLIES PER:							EACH OCCURRENCE	\$1,000,000.00
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						FIRE DAMAGE (Any one fire)	\$300,000.00	
							MED EXP (Any one person)	\$5,000.00	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$	
	<input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$	
	<input type="checkbox"/> HIRED AUTO <input type="checkbox"/> NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	\$	
	<input type="checkbox"/>								
	UMBRELLA LIAB <input type="checkbox"/> OCCUR						EACH OCCURRENCE	\$	
	EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE	\$	
	DED RETENTION \$								
							EACH OCCURRENCE	\$0.00	
							GENERAL AGGREGATE	\$0.00	
							EACH OCCURENCE	\$	
							GENERAL AGGREGATE	\$	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Sports camps
The Certificate Holder is added as an additional insured but only with respect to liability arising out of the named insured during the policy period.

Scheduled Activities Exclusion Applies-Please Refer to Named Insured Member Certificate of Coverage

CERTIFICATE HOLDER Newport - Mesa Unified School District Atta: Breck Lytle 2985 Bear Street, Building E Costa Mesa, CA 92626	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 <div style="text-align: center; font-size: 1.2em;">Francis L. Dean</div>
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							GENERAL AGGREGATE	\$

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Scheduled Activities Exclusion Applies-Please Refer to Named Insured Member Certificate of Coverage

CERTIFICATE HOLDER

City of Costa Mesa & its Officers, employees, agents, volunteers & Representatives
77 Fair Drive
Costa Mesa, CA 92626

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

Francis L. Dean

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SCHEDULED ACTIVITIES EXCLUSION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Description Of Activities:

Any activity specifically described in the Named Insured Member Certificate of Coverage (FM 101.0.0029) as an activity that is not covered under the Commercial General Liability policy.

In addition, scheduled activities exclusion endorsement applies: Inflatable Amusement Devices, Carnival Rides, Knockerball/Bubble Soccer, Bungee Devices, Fireworks, Mechanical Bucking Devices: including Multi Ride Attachments, Permanent & Mobile Rock Wall Structures, Security Services Other Than Contracted Law Enforcement Officers, Trampolines, and Zip Lines.

With Respect to Certificate Number(s) USP272184

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following exclusion is added to the policy:

2. Exclusions

This insurance does not apply to:

SCHEDULED ACTIVITIES

“Bodily Injury”, “Property Damage” or “Personal and Advertising Injury” resulting from or arising out of any activities listed in the above Schedule of this endorsement that are or were arranged and/or conducted by, or on behalf of, the “Named Insured Member”.

All other terms and conditions remain unchanged