

**NON-PROFIT ORGANIZATION
DIRECTORS AND OFFICERS
INCLUDING EMPLOYMENT PRACTICES LIABILITY
CERTIFICATE OF INSURANCE**

Certificate

Number: 25561

ISSUED: 02/27/2017

AUTHORIZED AGENT:

K&K INSURANCE GROUP, INC.

Company Affording Coverage:

NATIONWIDE MUTUAL INSURANCE COMPANY

**THE COVERAGE SHOWN ON THIS CERTIFICATE IS CLAIMS MADE COVERAGE
WHICH APPLIES ONLY TO CLAIMS FIRST MADE DURING THE COVERAGE PERIOD.**

This Certificate of Insurance provides you (the Insured Member) with the insurance indicated below as part of Master Policy #DNO-278672-00 issued to the Sports, Leisure and Entertainment RPG. This Certificate of Insurance together with the Master Policy Declarations, Coverage Form, Endorsements and Enrollment Form constitute the contract between the Insurer, the Organization and the Individual Insureds.

Item A. INSURED MEMBER/PARENT ORGANIZATION

DOVER YOUTH BABE RUTH SOFTBALL LG.
7 Drew Road
Dover, NH, 03820

ITEM B. COVERAGE PERIOD

Effective: 02/27/2017

Expiration:

02/01/2018

(at 12:01 a.m. Standard Time at the address of the Parent Organization)

ITEM C. LIMITS OF INSURANCE

PREMIUM

<p><u>\$1,000,000</u></p> <p><u>EXCLUDED</u></p> <p>\$ <u>500</u></p> <p><u>EXCLUDED</u></p> <p><u>EXCLUDED</u></p> <p><u>EXCLUDED</u></p>	<p>Limit of Liability</p> <p>Maximum Aggregate Limit of Liability for each Policy Year:</p> <p>Outside Service Coverage:</p> <p>Retention (Each Claim):</p> <p>Medical Payments for Participants</p> <p>Directors and Officers:</p> <p>Volunteers:</p>	<p><u>\$500.00</u></p> <p><u>EXCLUDED</u></p> <p><u>INCLUDED</u></p> <p><u>EXCLUDED</u></p> <p><u>EXCLUDED</u></p>
<p>Total Premium Fully Earned at Inception:</p>		<p><u>\$500.00</u></p>

NOTICES: ALL NOTICES REQUIRED TO BE GIVEN TO THE INSURER UNDER THIS COVERAGE SHALL BE ADDRESSED TO:

K&K Insurance Group, Inc.
PO Box 2338, 1712 Magnavox Way
Fort Wayne, IN 46801

By:



AUTHORIZED REPRESENTATIVE SIGNATURE