

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/06/2022

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).

PRODUCE		CONTACT NAME:							
	GAMIE LLC dba C3 RISK & INSURANCE SERVICES	PHONE (A/C, No, Ext): 619-369-9121 FAX (A/C No):							
	404 CAMINO DEL RIO S #410,	E-MAIL ADDRESS: lilly@c3insurance.com PRODUCER							
	SAN DIEGO, CA, 92108	CUSTOMER ID_:							
			INSURER(S) AFFORDING COVERAGE		NAIC #				
INSURED	Sports Marketing Program Management Inc.	INSURER A : H		AA1340041					
	FAR WEST RACING ASSOCIATION and Participating Leagues	INSURER B :							
	PO BOX 9681	INSURER C :							
	TRUCKEE, CA, 96162	INSURER D :							
		INSURER E :							
		INSURER F:							

COVERAGES CERTIFICATE NUMBER: A-SS-SU-22-10-07-262430 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		-		SURAN					SUBR WVD	POLICY NUMBER	POLICY EFF (MIM/DDYYYY)	POLICY EXP (MIM/DD/YYYY)	LIMITS		
	GENERAL LIABILITY X COMMERICAL GENERAL LIABILITY				Y		HDGL003700732	12/06/2022	12/06/2023	EACH OCCURRENCE	\$ 1,000,000.00				
Α					ſ	N	HDGL003700732	12/06/2022	12/06/2023	DAMAGE TO PREMISES RENTED (Any one premises)	\$ 300,000.00				
		CLAIM	IS-MAD	E	\	occu	JR						MED EXP (any one person)	\$ 5,000.00	
	X	INCLUDES	ATHLE	TIC PA	RTIC	CIPANT	s						PERSONAL & ADV INJURY	\$ 1,000,000.00	
									GENERAL AGGREGATE	\$ 2,000,000.00					
	GE	GENERAL AGGREGATE LIMIT APPLIES PER:			R:						PRODUCTS - COMP/OP AGG	\$ 1,000,000.00			
	X	POLICY	PR	OJECT		L	LOC							\$	
	AUTOMOBILE LIABILITY ANY AUTO HIRED AUTOS									COMBINED SINGLE LIMIT (Ea accident)	\$				
		ALL OWNED NON-OWNED AUTO		итоѕ	;					BODILY INJURY (Per person)	\$				
		AUTOS											BODILY INJURY (Per accident)	\$	
		SCHEDULED AUTOS											PROPERTY DAMAGE (Per accident)	\$	
Α		UMBRELLA LIA	AΒ		эсс			Υ	z	HDEX003700278	12/06/2022	12/06/2023	EACH OCCURRENCE	\$ 4,000,000.00	
	Х	X EXCESS LIAB CLAIMS-MADE		ADE						AGGREGATE	\$ 4,000,000.00				
	DEDUCTIBLE											\$			
	RETENTION \$									\$					
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY									WC STATU- OTH- TORY LIMITS ER					
	ANY PROPRIETOR PARTNER EXECUTIVE OFFICER MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under			N/A					E.L. EACH ACCIDENT	\$					
	SPE	CIAL PROVISIO	NS bel	ow									E.L. DISEASE - EA EMPLOYEE	\$	
													E.L. DISEASE - POLICY LIMIT	\$	
А	OTHER Abuse/Molestation				Υ		HDGL003700732	12/06/2022	12/06/2023	Each Occurrence: \$ 50,000.00	Aggregate: \$ 100,000.00				
	DESCRIPTION OF OPERATIONS / LOCATIONS / VE														

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

LIABILITY POLICY DEDUCTIBLE: \$0.00 PER EACH BODILY INJURY OR PROPERTY DAMAGE CLAIM. ISO OCCURRENCE FORM CG 00 01 04 13 AND COMPANY'S SPECIFIC FORMS. Coverage for Participant Legal Liability requires that every participant signs a waiver/release. The certificate holder is named as Additional Insured with respect to negligent acts or omissions of the Named Insured and only with respect to the Operations of the Insured during the coverage period. RE: Scheduled Non-athletic Participant Fundraisers and Banquets, Extra Location, 10 Instructors, Alpin (continued on next page)

С	Е	R	T	IF	IC	Α	Τ	Ε	Н	o	L	D	Ε	R	

MAMMOTH MOUNTAIN SKI AREA 10001 MINARET ROAD MAMMOTH LAKES, CA, 93546

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

The Si Perce

Mark Di Perno

AGENCY	NAMED INSURED FAR WEST RACING ASSOCIATION and Participating Leagues					
GAMIE LLC dba C3 RISK & INSURANCE SERVICES						
POLICY NUMBER	PO BOX 9681 TRUCKEE,					
HDGL003700732						
CARRIER	NAIC CODE	CA, 96162				
HDI Global Specialty SE	AA1340041	EFFECTIVE DATE:	12/06/2022			

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,					
FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance					
, Nordic and Freestyle Ski Races & Competitions, Alpine Ski, Snowboard Instruction Including a Freestyle Program					