

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: K&K INSURANCE GROUP, INC. CONTACT NAME: SPORTS. PHONE: 800-441-3994 FAX: 260-459-5120. E-MAIL ADDRESS: KK.SPORTS@KANDKINSURANCE.COM. INSURED: USA HOCKEY INC. AND ITS MEMBER LEAGUES, AND TEAMS. MEMBER NO: 41297. INSURER A: SCOTTSDALE INSURANCE COMPANY.

COVERAGES CERTIFICATE NUMBER: 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.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSD, SUBR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Includes Commercial General Liability, Automobile Liability, Umbrella Liab, Excess Liab, and Workers Compensation.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ATTACH ACORD 101, Additional Remarks Schedule, may be attached if more space is required). CLUB: SARATOGA YOUTH HOCKEY, INC. DATE: 9/1/15-9/1/16. \*CERTIFICATE HOLDER IS AN ADDITIONAL INSURED AS RESPECTS TO THE LIABILITY ARISING FROM THE NAMED INSURED.

CERTIFICATE HOLDER CANCELLATION

CITY OF SARATOGA SPRINGS OFFICE RISK AND SAFETY 474 BROADWAY SARATOGA SPRINGS, NY 12866. SEE ATTACHED ADDENDUM. 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: Scott Furbush

**ACORD**<sub>TM</sub>

**ADDITIONAL REMARKS SCHEDULE**

<b>AGENCY</b> K&K Insurance Group, Inc.		<b>NAMED INSURED</b> USA HOCKEY INC. AND ITS MEMBER LEAGUES, AND TEAMS	
<b>POLICY NUMBER</b> GL KRS0005721300		1775 BOB JOHNSON DRIVE COLORADO SPRINGS, CO 80906	
<b>CARRIER</b> SEE ACORD 25	<b>NAIC CODE</b>	<b>EFFECTIVE DATE:</b> SEE ACORD 25	

**ADDITIONAL REMARKS**

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
 FORM NUMBER:  SEE ACORD 25  FORM TITLE:  CERTIFICATE OF LIABILITY INSURANCE

**CERTIFICATE HOLDER/ADDITIONAL INSURED: (CONTINUED)**

1. CITY OF SARATOGA SPRINGS, NEW YORK  
RE: WIEBEL AND VERNON ICE RINKS
2. CITY OF GLEN FALLS, NEW YORK  
RE: GLENS FALLS ICE RINK
3. CITY OF SCHENECTADY, NEW YORK  
RE: SCRF ICE RINK
4. GLENS FALLS CIVIC CENTER ICE RINK  
1 CIVIC CENTER PLAZA  
GLENS FALLS, NY
5. WEIBEL AVENUE CONCESSION STAND

**\*THIS CERTIFICATE REPLACES THE CERTIFICATE ISSUED ON 8/25/15\***