



CERTIFICATE OF LIABILITY INSURANCE

Date (mm/dd/yy)
9/14/2006

Producer
Des Champs & Gregory, Inc.
1812 Manatee Ave., W.
Bradenton FL 34205
941-748-1812
www.deschampsgregory.com

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGEINSURER **A** Great American Assurance CompanyINSURER **B** Hartford Life Insurance CompanyINSURER **C**INSURER **D**INSURER **E**

Insured
Eastern Pennsylvania Soccer Association
US Adult Soccer Association, Inc. *
9152 Kent Avenue, Suite C-50
Indianapolis IN 46216

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE MM/DD/YY	POLICY EXPIRATION DATE MM/DD/YY	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIAB <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	PAC0000568875702	9/1/2006	9/1/2007	EACH OCCURRENCE \$ 1,000,000
					FIRE DAMAGE (Any one fire) \$ 300,000
					MED EXP (Any one person) \$ 5,000
					PERSONAL & ADV INJURY \$ 1,000,000
					GENERAL AGGREGATE \$ None
					PRODUCTS-COMP/OP AGG \$ 1,000,000
					GEN'L AGG LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	PAC0000568875702	9/1/2006	9/1/2007	COMBINED SINGLE LIMIT \$ 1,000,000
					BODILY INJURY (Per person) \$
					BODILY INJURY (Per accident) \$
					PROPERTY DAMAGE (Per accident) \$
					GARAGE LIABILITY <input type="checkbox"/> ANY AUTO
					AUTO ONLY - EA ACCIDENT \$
					OTHER THAN EA ACC \$
					AUTO ONLY: AGG \$
A	EXCESS LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE	EXC0000592861201	9/1/2006	9/1/2007	EACH OCCURRENCE \$ 1,000,000
					AGGREGATE \$ 1,000,000
					DEDUCTIBLE \$
					RETENTION \$
	WORKERS' COMPENSATION & EMPLOYERS' LIABILITY				STATUTORY LIMIT OTHER
					EL EACH ACCIDENT \$
					EL DISEASE - EA EMPLOYEE \$
					EL DISEASE - POLICY LIMIT \$
B	Excess Medical	36SB205940	9/1/2006	9/1/2007	\$5,000 Max \$400 Deductible

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

League: Lehigh Valley Soccer League, 330 South Saint Elmo Street, Allentown, PA 18104
Team: Allentown Sports Club 330 South Saint Elmo Street Allentown, PA 18104
Certificate Holder is Additional Insured as pertains to sanctioned games/practices of the Named Insured.
* Its Associations, Leagues, Teams and/or Affiliates
"The effective date of coverage for the team/league shown is the date they were accepted as a member of USASA."

CERTIFICATE HOLDER

Allentown Sports Club
Borough of Emmaus

Klines Lane Adult Soccer Field
28 South Fourth Street
Emmaus PA 18049

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Tim Mc Coy