

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

Í	CERTIFICATE OF LIABILITY INSURANCE												/16/2025	
C B	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 have ADDITIONAL INSURED provisions or be endorsed.													
lf	SUE	ROGATION IS	WA	IVED, subject t	o the	tern	ns and conditions of the	policy,	certain polic	ies may req				
_			not	confer rights to	o the	certi	ficate holder in lieu of su							
PRODUCER									CONTACT NAME: David Izquierdo PHONE (A/C, No, Ext): (469) 606-4588 FAX (A/C, No):					
Lifelong Insurance Agency, LLC.														
511 E. Broadway St.								ADDRESS: david@lifelongins.com INSURER(S) AFFORDING COVERAGE					NAIC #	
Prosper TX 75078								INSURER A :					NAIC #	
INSURED								INSURER B :						
United Baseball Club								INSURER C :						
2101 MIDWAY RD								INSURER D :						
								INSURER E :						
CARROLLTON							TX 75006-4923	INSURER F :						
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													מנ	
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 I			ADDL	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMI	TS		
	X	COMMERCIAL GE	_								EACH OCCURRENCE	\$	1,000,000	
		CLAIMS-MAD	E	OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$		
									0.0 /0.0 /0.00 /	00/00/0000	MED EXP (Any one person)	\$	5,000	
Α							9YAPG0001334486100		08/23/2024	08/23/2025	PERSONAL & ADV INJURY	\$	1,000,000	
	GEN		0-								GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	\$	5,000,000	
		OTHER:	51								PRODUCTS - COMP/OP AGG	\$ \$	1,000,000	
	AUT	OMOBILE LIABILIT	Y								COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000	
		ANY AUTO									BODILY INJURY (Per person)	\$		
А		OWNED AUTOS ONLY		SCHEDULED AUTOS			9YAPG0001334486100		08/23/2024	08/23/2025	BODILY INJURY (Per accident)	\$		
	X	HIRED AUTOS ONLY	X	NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	\$		
												\$		
		UMBRELLA LIAB	-	OCCUR							EACH OCCURRENCE	\$		
				CLAIMS-MADE	-						AGGREGATE	\$		
		DED RETE	TION	•							PER OTH- STATUTE ER	\$		
	AND EMPLOYERS' LIABILITY Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE									E.L. EACH ACCIDENT	\$			
	OFFICER/MEMBER EXCLUDED?			N/A						E.L. DISEASE - EA EMPLOYEE	-			
	If yes DES	s, describe under CRIPTION OF OPER	RATIO	NS below							E.L. DISEASE - POLICY LIMIT	\$		
	М	ed Pay for Partici	inant	-							Medical Payment		25,000	
А		exual Abuse/Mole					9YAPG0001334486100		08/23/2024	08/23/2025	SAM		100,000	
Le Th	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Legal Liability to Participants limit is per occurrence. The certificate holder is known as additional insured, but only for liability caused, in whole or in part, by the acts or omissions of the named insured when required by written contract.													
CEI	CERTIFICATE HOLDER								CANCELLATION					
Mckinney Christian Academy								SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
3601 Bois D Arc Rd								AUTHORIZED REPRESENTATIVE David. Izguiarda						
McKinnev TX 75071									R LEVIQUE, TUDET					

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