# **USA Softball**

AN RPS SIGNATURE PROGRAM

# 2023 USA Softball Clinic and Tournament Insurance Plan

### General liability coverage for USA Softball events:

The USA Softball tournament/clinic liability insurance plan provides protection for lawsuits and court judgments that may result from bodily injury and property damage claims arising from your USA Softball-sanctioned tournament or clinic operations. Underwritten by State National Insurance Company, the policy limits are as follows:

- \$3 million per occurrence limit
- \$5 million aggregate limit per location
- \$2 million products/completed operations aggregate
- \$1 million advertising/personal injury limit
- \$1 million sexual abuse limit per occurrence
- \$2 million sexual abuse limit aggregate
- \$1 million damage to premises rented liability
- \$10,000 medical payments (to nonparticipants)

### Who is covered under this policy?

- Tournament or clinic organizers
- Tournament or clinic officials
- · Participating teams or players
- Individual team members
- Field owners (as additional insureds, if requested)
- Tournament or clinic sponsors

**Please note:** There is no property damage coverage for parked vehicles.

# Accident medical coverage for USA Softball event participants:

Under the USA Softball tournament/clinic accident insurance plan, coverage extends to covered injuries incurred by tournament participants while practicing or playing in tournament games.

For clinics, coverage applies to participants while taking part in clinic activities at the designated clinic site. There is no coverage for travel or off-premises activities under this plan.

## Underwritten by SiriusPoint of America, the accident policy provides the following benefits:

\$250,000	accident medical limit per claim
up to \$10,000	accidental death/dismemberment
\$500	deductible

This policy is written on an excess basis, which means that the policy is secondary to any other valid and collectible insurance or healthcare plan you may have. Thus, you need to submit your expenses to your own healthcare plan first for this policy to consider your claim. If you have no other coverage in force, this policy will pay your claim as primary, subject to the deductible and other policy terms.

The policy only covers medical and dental expenses that are incurred during the benefits period within 52 weeks of the date of injury.



### Tournament and clinic insurance information:

- Tournaments and clinics must be USA Softball approved or sanctioned by your local USA Softball commissioner to be eligible for this insurance program.
- The enrollment form must be signed by a USA Softball commissioner in order to bind coverage.
- Coverage goes into effect on the day the tournament or clinic starts, provided that the enrollment form and full premium are received by RPS prior to the start date.
- You can purchase the liability and accident insurance either separately or as a package.
- Coverage automatically extends to makeup dates caused by weather, but no refunds are allowed for this program.
- Once the event is USA Softball sanctioned, you can purchase coverage online with a credit card at RPSBollinger.com.
- Apply by mail by completing the enrollment form and mailing along with a check to RPS Bollinger, Inc.

### **Event rates:**

All policies are subject to a minimum premium.

- \$50 for liability insurance only
- \$50 for accident insurance only
- \$100 for liability and accident insurance

### Tournament rates (per team):

### Liability insurance

• Junior Olympic: \$3.00

### Accident insurance

- Junior Olympic: \$4.00
- Adult: \$7.50

### Liability and accident insurance

• Junior Olympic: \$6.00

## Instructional/playing clinic rates (per participant/per day):

### **Rates for Indoor or Outdoor Clinics**

#### Liability insurance

• Junior Olympic: \$0.65

### Accident insurance

• Junior Olympic: \$0.35

### Liability and accident insurance

• Junior Olympic: \$1.00

### This plan is designed for purchase by:

- USA Softball tournament directors
- USA Softball tournament sponsors
- USA Softball clinic directors/sponsors
- USA Softball tournament/clinic organizers
- USA Softball leagues sponsoring tournaments

### **OFFICE LOCATION**

200 Jefferson Road, Whippany, NJ 07981 Phone: 800.446.5311 | Fax: 973.921.8474

#### **RPSins.com/SignaturePrograms**



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This brochure provides a summary of available insurance coverages, but it is not an insurance policy. Please read the actual insurance policy issued together with its declarations page and any endorsements for a complete recitation of the terms, conditions and exclusions of the policy of insurance. The policies are subject to the laws of the jurisdiction in which they are issued.

### **Clinic/Tournament Enrollment Form**

Tournament/clinic name:				
Tournament/clinic official's name:				
Address:				
City:		State:	ZIP:	
Phone:				
Email:				
Dates of tournament/clinic (each date must be listed, not a range	of dates; use an additional s	sheet if needed):		

Location of tournament/clini	ic:	
Additional insured (if any):		

### Premium Calculation: Minimum Premium May Apply

Tournament Insurance: Refer to Event Rate Section (page 2)		
Plan type: Package 🗌 Liability only 🗌	Accident only	
# of JO teams × rate \$	= \$	
# of adult teams × accident rate \$7.50 = \$ _		
Clinic Insurance: Refer to Event Rate Section (page 2)		
Plan type: Package 🗌 Liability only 🗌	Accident only	
# of participants per day × # of days	× rate \$	
Total event premiums	\$	
Rush certificate processing fee	\$	
Total amount enclosed	\$	
Important: The following must be completed in order to bind	coverage.	
By signing this enrollment form, I verify that the information	provided is true and correct, and that	this is a USA Softball-sanctioned event.
Your signature:		Date:
Your USA Softball state/metro commissioner must also sigr	n this form to confirm that the above e	events are sanctioned.
USA Softball commissioner's signature:		
Title:	Date:	Phone:
You may purchase coverage with a credit card at RPSBolling P.O. Box 1322, Morristown, NJ 07960.		

