

Optional Insurance Plans

For Not-for-Profit Sports Organizations



Plan 1: D&O/EPLI Liability Insurance

RPS Bollinger's combined plan of Directors & Officers Liability (D&O) and Employment Practices Liability (EPLI) insurance provides protection for lawsuits stemming from actual or alleged wrongful acts and errors and omissions against the directors and officers of not-for-profit Sports organizations, as well as their employees and volunteers. The policy provides protection for suits brought against the sports organization as an entity, as well as individuals who are acting in an official capacity on behalf of the organization.

Coverage Description & Policy Limit Options:

Option 1) \$1M per claim/\$1M per policy term

\$0	Deductible
Defense Costs:	In addition to policy limits
Option 1 Annual Premium:	\$495

Option 2) \$2M per claim/\$2M per policy term

\$0	Deductible
Defense Costs:	In addition to policy limits
Option 2 Annual Premium:	\$963

This plan does not provide coverage for lawsuits involving bodily injury or property damage. Those types of claims are meant to be covered under the organization's General Liability policy.

Please note: This coverage is written on a "claims made basis." All claims under this policy must be reported to the insurance company within the policy term in order to be eligible for coverage.

Examples of D&O/EPLI Claims Scenarios:

- **Discrimination:** Lawsuits alleging discrimination can arise when a league chooses one coach over another; or when selecting players for elite or all-star teams.
- **Sexual Harassment:** Whether in the office or out on the field, a member of the organization may harass a volunteer, player or other employee. Not to be confused with Sexual Abuse (which is Bodily Injury), harassment claims are among the most common types of claims under this policy.
- **Wrongful Suspension/Dismissal:** How the organization disciplines or terminates coaches, players or even board members when they violate the code of behavior can often result in a lawsuit.
- **Acting Beyond Authority:** In the event a coach, board member or volunteer makes decisions beyond his/her authority, a lawsuit may arise. Even in cases where they are simply enforcing existing rules, people who don't like those rules can file a lawsuit.

For-profit organizations are not eligible for coverage under this Program. Contact RPS Bollinger for a quote.

Plan 2: Crime Insurance

This newly designed plan provides protection for Sports Organizations against the financial loss caused by the dishonest disappearance of money, securities or financial instruments. The Crime Insurance program has been expanded to cover the exposures of today's sports organizations, whether the crime is committed by an officer, volunteer or employee. The policy includes the following package of coverages:

Crime Insurance Policy Limits & Details:

Employee Dishonesty: \$25,000 per loss

Covers financial loss by employee or volunteer through theft or forgery

Theft (on premise/off premise): \$10,000 per loss

Covers financial loss from robbery or burglary on/off premises

Depositor's Forgery Coverage: \$10,000 per loss

Protects losses due to forgery or alteration of checks or drafts

Computer Fraud Coverage*: \$10,000 per loss

Protects loss to financial instruments and inventory as a result of a hacking event or electronic fraud

Funds Transfer Coverage*: \$10,000 per loss

Covers loss due to transfer of money or securities based on fraudulent documentation allegedly sent by your organization

Client Coverage*: \$10,000 per loss

Extends coverage to include loss of money/securities to a 3rd party for which your organization is legally liable

Social Engineering Fraud*: \$10,000 per loss

Covers financial loss due to deception, impersonation and other fraudulent or scam scenarios – such as a hacker posing as a vendor who redirects your payment to their bank account

Expense Limit: \$5,000 per loss

Pays for auditors' fees or investigation costs to identify losses

Deductible: \$250 per claim

*These coverages are new to the program for 2017!

Crime Insurance Annual Premium:

Option 1) Limits as shown \$260

Option 2) Increase Employee Dishonesty to \$50,000; other limits as shown \$326

Option 3) Increase Employee Dishonesty to \$100,000; other limits as shown \$392

Please note this policy does not cover the loss of equipment or other Association/Club property. Consult with your agent if you own property or equipment that needs to be insured.

Additional Details Regarding the D&O/EPLI and Crime Insurance Plans:

- These plans may be purchased by Teams, Clubs, Chapters or local Sports Organizations.
- NOTE: Sports associations that are regional, statewide or national in scope must be individually underwritten and priced by RPS Bollinger.
- Commercial General Liability must be in force in order to purchase the D&O/EPLI insurance through this program.
- D&O and Crime plans are available only to Not-for-Profit associations. If your organization is For-Profit, please contact RPS Bollinger.

Insurance Carrier: These policies are underwritten by the Chubb Group of Insurance Companies, Warren, NJ. Chubb is rated A++ (Superior) by A.M. Best's rating service.

IMPORTANT NOTE: This brochure provides a summary of available insurance coverages. It is not an insurance policy. Please see the actual insurance policies, together with their declarations pages and endorsements for a complete recitation of the terms, conditions and exclusions. These policies are subject to the laws of the jurisdiction in which they are issued.

If you are a resident of New Jersey, Florida or Kentucky, please be advised that state surcharges and/or taxes may apply to orders for Directors & Officers Liability Insurance. An invoice for any applicable surcharges will be included with your policy.

Organizations in Washington, please contact us for a different application. Organizations in Vermont, Wyoming & Alaska are subject to surplus lines tax.

Contact us at: SportService@RPSins.com



RPS BOLLINGER

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BOLLINGER SPORTS & LEISURE

Enrollment Form: Optional Insurance Plans for Sports Associations

Contact Name: _____ Title: _____

(Must be an Officer of the Association or Club)

Association/Club Name: _____

Association/Club Mailing Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Email: _____

Nature of Operations: _____

***Organizations in Washington, please contact us for a different application**

This section must be completed for all new Chubb insureds (D&O or Crime)

This Enrollment Form is for: New Coverage Renewal Coverage

Association is: 501c3 Non-Profit For Profit*

*For-Profit entities are not eligible to purchase these coverages and must be individually underwritten by RPS Bollinger.

Please list: # of Employees _____ # of Members _____ # of Adult Volunteers _____ # of Players _____

Financial Information

Attach a copy of Audited Financial Statement -OR- List the following below:

Gross Annual Revenues: \$ _____ Total Assets: \$ _____

This section must be completed for all new Chubb Insureds: Prior Acts Exclusion acknowledgement

No person proposed for this coverage is aware of facts or circumstances which he/she has reason to suppose might give rise to a future claim, with the exception of (choose one):

NONE (No known circumstances) - or - Describe Circumstance(s) here: _____

It is agreed that if such facts of circumstances exist, whether or not disclosed, any claim arising from such facts or circumstances is excluded from this proposed coverage.

Please check the plans you are purchasing:

D&O/EPL

A. Option 1 - \$1,000,000 limit \$495

B. Option 2 - \$2,000,000 limit \$963

Crime

C. Option 1 - \$25,000 Employee Dishonesty limit \$260

D. Option 2 - \$50,000 Employee Dishonesty limit \$326

E. Option 3 - \$100,000 Employee Dishonesty limit \$392

How to apply or renew Optional Insurance

1. On-line with a credit card at RPSBollinger.com Please note a \$25 processing fee applies to all credit card orders.

2. Or mail the completed application along with payment to RPS Bollinger, PO Box 390, Short Hills, NJ, 07078.

For Office Use Only:

Policy #: _____

Effective Date: _____

Applied Code: _____

Verification: By signing this enrollment form, I hereby verify that all information provided is true and correct. If applying for D&O/ EPL coverage, I hereby verify that Commercial General Liability is in force for the Association/Club listed above.

Signature of Association/Club Officer: _____ Date: _____