CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/8/2010

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).

INSURED

Martin Rosner Eleftherion, Inc.

2975 Westchester Avenue

Purchase NY 10577 FILUNE (A/C, No, Ext): 914.696.3000 E-MAIL ADDRESS: NAME:

FAX (A/C. No): 914.696.3020

PRODUCER CUSTOMER ID #:

CONTACT

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURER A: Royal Insurance

INSURER B: INSURER C: INSURER D:

INSURER E: INSURER F:

123 Main Street Anywhere

XYZ Soccer Facility

NY 10002

COVERAGES

CERTIFICATE NUMBER:kldlk

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
LIK	GENERAL LIABILITY	INOR	WVD	12-237	01/01/2012	01/01/2013	EACH OCCURRENCE	s 1,000,000	
	X COMMERCIAL GENERAL LIABILITY				,,	,,	DAMAGE TO RENTED	s 100,000	
А	CLAIMS-MADE X OCCUR						PREMISES (Ea occurrence)	s 5,000	
							MED EXP (Any one person)	\$ 1,000,000	
	X Incl Participant Liab.						PERSONAL & ADV INJURY	\$ 2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	s 2,000,000	
	POLICY PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$	
	AUTOMOBILE LIABILITY			12-237	01/01/2011	01/01/2012	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
_	ANY AUTO						BODILY INJURY (Per person)		
A	ALL OWNED AUTOS						\$ BODILY INJURY (Per acciden	t)	
	SCHEDULED AUTOS						\$		
	X HIRED AUTOS						PROPERTY DAMAGE (Per accident)	\$	
	X NON-OWNED AUTOS						,	\$	
								\$	
	X UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	s 1000000	
	EXCESS LIAB CLAIMS-MADE					AGGREGATE		\$ 1000000	
								\$	
	DEDUCTIBLE RETENTION \$							\$	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N							WC STATU- OTH-ER		
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?		N/A					E.L. EACH ACCIDENT	\$	
(Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below Sexual Abuse & Molestation Spectator						E.L. DISEASE - POLICY LIMIT	\$	
Limit \$1,000,000									

Limit \$5000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

ABC Soccer Club, DEF Soccer League and Eastern NY Soccer Association are added as additional Insured with respect to soccer related activities in your rental facility located at

CERTIFICATE HOLDER

Eastern NY Youth Soccer Association & Its Past, Present & Future Officers & Directors 167 Nassau Blvd, Garden City South, NY, 11530

CANCELLATION: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.



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