

LOS ANGELES UNIFIED SCHOOL DISTRICT

Risk Management Department Risk Finance & Insurance Services

LAUSD INSURANCE GUIDELINES - ATHLETICS/TOURNAMENTS

Please use this checklist as a guideline for athletics and sports tournament leases in order to safeguard students, school site administrators, and others. Note that there are unique circumstances that may require additional coverage. If you have any questions regarding the insurance guidelines please contact Risk Finance at (213)241-0329 or email riskfinance@lausd.net.

ATHLETICS – LESSEE/VENDORS			
INSURANCE LIMITS:			
COMMERCIAL GENERAL LIABILITY*			
Per Occurrence Limit	\$5,000,000		
Personal & Advertising Injury	1,000,000		
General Aggregate Limit	5,000,000		
Products & Completed Operations Aggregate	1,000,000		
Fire Damage (Any One Fire)	50,000		
Medical Payments (Any One Person)	5,000		
(*- School year: 2021 and forward)			
ABUSE & SEXUAL MOLESTATION**			
Per Occurrence Limit			
General Aggregate Limit	\$1,000,000		
**Vendors that will be in contact (Non-Incidental) with youth	1,000,000		
(18 & under) will require Abuse & Sexual molestation coverage.			
COMMERCIAL AUTO POLICY***			
Combined Single Limit	\$1,000,000		
***All owned, hired and non-owned autos must be covered. If there are no owned autos a signed Commercial Auto Liability waiver is required.			
WORKER 'S COMPENSATION****	Statutory		
Employer Liability	\$1,000,000		
**** Sole proprietors with no employees are exempt from providing WC coverage, but must provide a signed waiver			
statement.			
 CIF Athletic Tournaments may be covered under the District Self-Insurance program. Athletic Office verification required for school sponsored tournament Application to Participate in Sanctioned Tournament Application to Host sanctioned Tournament 			
 Cheerleading: Requires prior approval for Special Event Liability Program <u>Additional</u> <u>Requirements:</u> 			
Participant waiver			
Organizer/Vendor waiver			
The Commercial General Liability Policy, Abuse coverage, and the Commercial Automobile Po	licy		

must contain an Additional Insured Endorsement & Certificate Holder wording of:

LOS ANGELES UNIFIED SCHOOL DISTRICT & THE BOARD OF EDUCATION OF THE CITY OF LOS ANGELES 333 S Beaudry Ave, 28th Floor, Los Angeles, CA 90017

Los Angeles Unified School District Civic Center Sample Certificate of Insurance

		- ((MM/DD/YYY) 9/1/21		
	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).														
	PRODUCER Mr. Broker 1 Main St							CONTACT Mr. Broker NAME: FAX PHONE 6005551212 FAX FAX FMAL mthospec@context.com							
		ytown, Any City, 0000	01						INSURER(s) AFFORDING COVERAGE NAIC # INSURER A : best insurance company						
		My BBall Team 2 Main St						INSURER B :							
	Anytown, My City, 00002								INSURER D : INSURER E : INSURER F :						
		T IN C	NDICATED. NOTWITH ERTIFICATE MAY BE XCLUSIONS AND COM	THAT THE POLICIES HSTANDING ANY RE E ISSUED OR MAY	OF QUIP PERT POLI	INSUF REMEI FAIN, CIES.	NUMBER: RANCE LISTED BELOW HAY NT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	OF ANY ED BY T	CONTRACT HE POLICIE	THE INSURE OR OTHER (S DESCRIBE PAID CLAIMS	DOCUMENT WITH RESPE D HEREIN IS SUBJECT	CT TO	WHICH THIS		
		LTR			INSR	SUBR	POLICY NUMBER		MM/DD/0001		LIN EACH OCCURRENCE DAMAGE TO RENTED	лтв 5 с	5,000,000 50,000		
Required Insurance Coverage. See below for additional information.	-	A	CLAIMS-MAD	e X occur	x		aaa12345		10/1/21	10/1/22	PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMPIOP AGG	\$ \$ \$ \$	5,000 1,000,000 5,000,000 1,000,000	•	
	->	A			×		bbb5678		10/1/21	10/1/22	COMBINED SINGLE LIMIT (Ea accident) BOOILY INJURY (Per person) BOOILY INJURY (Per acciden PROPERTY DAMAGE (Per accident)	\$ \$ \$ \$ \$ \$ \$	1,000,000	-	Required Limits of Insurance.
			UMBRELLA LIAB EXCESS LIAB DEO RETEI WORKERS COMPENSAT AND EMPLOYERS' LIAB ANY PROPRIETOR/PART OFFICERMEMBER EXCL		N/A		ccc91011		1/1/21	1/1/22	EACH OCCURRENCE AGGREGATE WC STATU- TORY LIMITS ER E.L. EACH ACCIDENT	\$ \$ \$ + \$	1,000,000		See below for additional information
		A	(Mandatory In NH) If yes, describe under DESCRIPTION OF OPER Abuse & Molestatio				aaa12345		10/1/21	10/1/22	EL. DISEASE - EA EMPLOYE EL. DISEASE - POLICY LIMP \$1,000,000 (occ/agg)		1,000,000 1,000,000		
	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required) Los Angeles Unified School District and the Board of Education of the City of Los Angeles are included as additional insured with respects to General Liability and Auto Liability.												•	Additional Insured, must say this:	
	_	CE	RTIFICATE HOLDE	ER				CANC	ELLATION					' (]	
Certificate Holder,	Los Angeles Unified School District and the Board of Education of the City of Los Angeles 333 S Beaudry Ave, 28th Floor						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.								
must say this:			os Angeles,	CA 90017				1	gnature						
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	Additional Information: General Liability Limits Requirements:														
	Athletic Activities (2021-22 School Year):\$5,000,000/5,000,000 (occurrence/aggregate)Non-Athletic Activities:\$1,000,000/2,000,000 (occurrence/aggregate)														
	Abuse & Sexual Molestation Coverage (applicable when youth are involved) \$1,000,000 (occurrence/aggregate)														
			mmercial Auto				& Non-owned) os, a signed waiver			00 (comb	vined single limit)				
		w	orkers Comper	nsation				9	Statutory	/ (\$1,000,	,000 Acc/Emp/Po	I)			

If there are no employees, a signed waiver is required.