



# CERTIFICATE OF LIABILITY INSURANCE

This certificate is issued as a matter of information only and confers no rights upon the certificate holder and imposes no liability on the insurer. This certificate does not amend, extend or alter the coverage afforded by the policies below.

<b>1. CERTIFICATE HOLDER - NAME AND MAILING ADDRESS</b>		<b>2. INSURED'S FULL NAME AND MAILING ADDRESS</b>	
St. George's Anglican Church		Ontario Artistic Swimming and Member Clubs	
60 Guelph St.		83 Galaxy Blvd., Unit 2	
Georgetown	ON	POSTAL CODE L7G 3Z5	Etobicoke
			ON
			POSTAL CODE M9W 5X6

**3. DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES** (but only with respect to the operations of the Named Insured)

Sanctioned activities of the Named Insured with respect to activities to support the sport of artistic swimming.  
 Exclusions Included: Communicable Disease Exclusion; Liquor Liability Exclusion  
 Participant Liability Included  
 Club: Halton Hills Artistic Swimming Club  
 See Attached...

**4. COVERAGES**

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 requirements, terms or conditions 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 terms, exclusions and conditions of such policies.

**LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS**

TYPE OF INSURANCE	INSURANCE COMPANY AND POLICY NUMBER	EFFECTIVE DATE YYYY/MM/DD	EXPIRY DATE YYYY/MM/DD	LIMITS OF LIABILITY (Canadian dollars unless indicated otherwise)			
				COVERAGE	DED.	AMOUNT OF INSURANCE	
<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS MADE <b>OR</b> <input checked="" type="checkbox"/> OCCURRENCE <input checked="" type="checkbox"/> PRODUCTS AND / OR COMPLETED OPERATIONS <input checked="" type="checkbox"/> EMPLOYER'S LIABILITY <input checked="" type="checkbox"/> CROSS LIABILITY  <input type="checkbox"/> WAIVER OF SUBROGATION  <input checked="" type="checkbox"/> TENANTS LEGAL LIABILITY <input type="checkbox"/> POLLUTION LIABILITY EXTENSION <input checked="" type="checkbox"/> D&O Liability <input checked="" type="checkbox"/> E&O Liability	GameDay Insurance Inc. SLE00606	2024/04/01	2025/04/01	COMMERCIAL GENERAL LIABILITY BODILY INJURY AND PROPERTY DAMAGE LIABILITY - GENERAL AGGREGATE			
					- EACH OCCURRENCE	1,000	10,000,000
				PRODUCTS AND COMPLETED OPERATIONS AGGREGATE		10,000,000	
				<input type="checkbox"/> PERSONAL INJURY LIABILITY OR		10,000,000	
				<input checked="" type="checkbox"/> PERSONAL AND ADVERTISING INJURY LIABILITY			
				MEDICAL PAYMENTS		10,000	
				TENANTS LEGAL LIABILITY	1,000	2,000,000	
				POLLUTION LIABILITY EXTENSION			
				Directors & Officers Liability,	1,000	5,000,000	
				Errors & Omissions Liability	1,000	5,000,000	
<input checked="" type="checkbox"/> NON-OWNED AUTOMOBILES <input checked="" type="checkbox"/> HIRED AUTOMOBILES	GameDay Insurance Inc. SLE00606	2024/04/01	2025/04/01	NON-OWNED AUTOMOBILES		10,000,000	
HIRED AUTOMOBILES				1,000	50,000		
<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> DESCRIBED AUTOMOBILES <input type="checkbox"/> ALL OWNED AUTOMOBILES <input type="checkbox"/> LEASED AUTOMOBILES ** ** ALL AUTOMOBILES LEASED IN EXCESS OF 30 DAYS WHERE THE INSURED IS REQUIRED TO PROVIDE INSURANCE				BODILY INJURY AND PROPERTY DAMAGE COMBINED			
				BODILY INJURY (PER PERSON)			
				BODILY INJURY (PER ACCIDENT)			
				PROPERTY DAMAGE			
				EACH OCCURRENCE			
<b>EXCESS LIABILITY</b> <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/>				AGGREGATE			
<b>OTHER LIABILITY (SPECIFY)</b> <input checked="" type="checkbox"/> Abuse Coverage <input type="checkbox"/>	GameDay Insurance Inc. GAME00499	2023/04/01	2024/04/01	Abuse Coverage	1,000	500,000	

**5. CANCELLATION**

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail   0   days written notice to the certificate holder named above, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

<b>6. BROKERAGE/AGENCY FULL NAME AND MAILING ADDRESS</b>		<b>7. ADDITIONAL INSURED NAME AND MAILING ADDRESS</b> (Commercial General Liability- but only with respect to the operations of the Named Insured)	
Arthur J. Gallagher Canada Limited			
435 McNeilly Road, Suite 203			
Stoney Creek	ON	POSTAL CODE L8E 5E3	
<b>BROKER CLIENT ID:</b>			POSTAL CODE

<b>8. CERTIFICATE AUTHORIZATION</b>		CONTACT NUMBER(S)	
ISSUER Arthur J. Gallagher Canada Limited		TYPE Phone NO. 905-575-1122	TYPE NO.
AUTHORIZED REPRESENTATIVE Kara Glauser		TYPE Fax NO. 905-643-8321	TYPE NO.
SIGNATURE OF AUTHORIZED REPRESENTATIVE <i>Kara Glauser</i>	DATE 2024/03/28	EMAIL ADDRESS Kara_Glauser@ajg.com	

DESCRIPTIONS Continued.

Indoor Dryland Practices  
60 Guelph St.  
Georgetown, ON  
L7G 3Z5

The Insurance afforded is subject to the Terms, Conditions, and Exclusions of the Policy(s) above cited. This Certificate is issued as a matter of information only and confers no rights on the holder and imposes no liability on the Insurer.