



Local Association Directors & Officers and General Liability Insurance Information

USBC is pleased to continue to make available Directors & Officers and General Liability Insurance to local associations. Below are the details on these insurance programs:

Directors & Officers Liability:

- **If your association purchased the Directors & Officers Insurance program for the 8-1-08-09 period, do not complete this application. Your association will be receiving a renewal application directly from The Horton Group.**
- This insurance covers lawsuits resulting from any actual or alleged "wrongful act." A "wrongful act" includes errors, omissions, and acts of negligence or breach of duty by a covered individual while performing their duties for the association.
- Individuals covered include all board members, directors, officers, employees, and volunteers.
- This is a group purchasing policy and all participating associations will share in the \$1,000,000 each claim, \$2,000,000 aggregate policy. The policy covers defense and claim costs for a covered lawsuit.
- A \$500 deductible applies to each claim.
- Cost is based on your total membership numbers.
- To apply for coverage, complete and follow the instructions in the Directors & Officers application.
- Policy term will run from 8-1-09 to 8-1-10 for all applications received by 9-30-09. Coverage for applications received after 9-30-09 will become effective the first of the month following receipt of the application, and will expire 8-1-10. There is no pro-ration in the premium cost.
- Applications will not be accepted after 12-31-09.
- Upon acceptance of your application you will be sent a coverage confirmation document.
- State Associations are covered under a separate policy and should not apply for this coverage – see the separate application & instructions on the bowl.com website.
- This insurance coverage is available only to U.S. associations.

General Liability:

- **This program is continuing through Lupke-Rice Associates. If your association purchased the General Liability Insurance program for the 8-1-08/09 period, do not complete this application. Your association will be receiving a renewal application directly from Lupke-Rice Associates.**
- This insurance provides protection for claims from third party bodily injury, property damage or personal injury occurring at association sponsored events or the association's office.
- This is a group purchasing policy and all participating associations are provided their own \$1,000,000 each occurrence, \$2,000,000 aggregate limits of protection.
- Cost is based on your total membership numbers.
- To apply for coverage, complete and follow the instructions in the General Liability application.
- This insurance coverage is available only to U.S. associations.

You may ask, who would sue us? Well, consider the following examples of some filed lawsuits:

- A suit brought by a bowler who was disqualified from the association tournament;
- A suit brought by a bowler who's membership privileges were suspended;
- A suit brought by a member when a copy of the member's letter of suspension was made public;
- A suit alleging discrimination by the association;
- A suit filed against an association because of who was awarded its tournament.

If you have questions or need assistance with these insurance programs, contact Kim Hohensee or Doug Henderson at The Horton Group, Inc. 800 242-9028, or e-mail at kim.hohensee@thehortongroup.com or doug.henderson@thehortongroup.com.

**Local Associations of United States Bowling Congress
Non Profit Directors and Officers Liability New Application & Warranty Letter
Philadelphia Indemnity Insurance Company**

Instructions: Please type or print clearly. Answer ALL questions completely. This form must be completed, dated and signed by the President or Board Chairman of the association applying for this insurance.

Association Name & USBC Number: _____

Principal Address: _____

City/State/Zip: _____

Contact Person: _____ Phone #: _____ Email: _____

Total Number of Association Members: _____

Signature: _____

Printed Name & Title: _____

Date: _____

Please determine your association's premium in the section below. Make your check payable to **The Horton Group, Inc.** and forward with the completed application to: **The Horton Group, Inc., N19 W24101 N. Riverwood Drive, Waukesha, WI 53188.**

<u>Local Membership</u>	<u>Annual Premium</u>
Up to 1000 members	\$150
1001 to 3500 members	\$350
3501 members and over	\$500

The anniversary date of coverage is August 1st. Applications received after September 30th will be effective the first of the month following receipt of the application, and will expire the following August 1st. There is no pro-rata in the premium cost. Applications will not be accepted after December 31st. Upon acceptance of your application you will be sent a coverage confirmation document.

If you have questions or need assistance, contact Kim Hohensee or Doug Henderson at The Horton Group, Inc. 800-242-9028, or e-mail at kim.hohensee@thehortongroup.com or doug.henderson@thehortongroup.com.



Lupke Rice
INSURANCE AND
FINANCIAL SERVICES

BOWLING IS AMERICA'S GREATEST SPORT!!

Does Your Association Provide Liability Coverage:

The United States Bowling Congress provides yet another significant membership benefit. Affiliated associations can secure comprehensive, affordable General Liability Insurance which covers third party bodily injury, property damage, or personal injury claims. This coverage has been specially tailored to protect members while participating in league and tournament play and other association functions such as board meetings, workshops and banquets.

In today's litigious society, it has become imperative that associations provide a resource of liability insurance for its members. The Bowling Insurance Program offers uniform coverages and consistent pricing for all associations.

The Anniversary date of coverage is 8/1/09. Applications received after 9/30/09 will be effective the date we receive the application and check and will expire 8/1/10. There is no pro-ration in the premium cost.

Bowling Liability Insurance Program Coverage Limits:

General Total Limit	\$2,000,000
Products/Completed Work Total	\$2,000,000
Per Occurrence	\$1,000,000
Personal & Advertising Injury	\$1,000,000
Premises Damage Limit	\$ 100,000
Medical Expense Limit	\$ 5,000
There is no Deductible	

Complete listing of coverages, conditions and exclusions are available in the Master Policy

**APPLICATION FOR
GENERAL LIABILITY
COVERAGE**

Name of Association _____

Office Address _____

City _____ State _____ Zip Code _____

Contact Person _____ Phone No. _____

E-mail address _____

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Local Association: Membership Last Season _____

State Association: Number of State Tournament Participants _____

Premium Enclosed \$ _____

Signature of Association Officer _____



Lupke Rice
INSURANCE AND
FINANCIAL SERVICES

Make your check payable to Lupke-Rice Associates, and mail to:

**Lupke Rice Associates
Attn: John Kuker/Annette Caffrey
P.O. Box 11309
Fort Wayne, IN 46857
Phone: 800-423-4150**

HOW DO ASSOCIATIONS APPLY FOR COVERAGE?

1. Complete the application form on attached page
2. Calculate your premium using the applicable rate (Schedule Below)
3. Make your checks payable to Lupke Rice Associates, P.O. Box 11309, Ft. Wayne, IN 46857

RATE STRUCTURE Membership Last Season	LOCAL ASSOCIATIONS: Premium
0 - 500	\$ 142.14
501 - 1,000	\$ 188.49
1,001 - 2,000	\$ 284.28
2,001 - 5,000	\$ 591.22
5,001 - 7,000	\$ 772.50
7,001-10,000	\$ 1,182.44
10,000 and over	\$ 1,812.80

RATE STRUCTURE Number of State Tournament Participants	STATE ASSOCIATIONS Premium
1 - 3,000	\$ 276.04
3,001 - 6,000	\$ 542.81
6,001 and over	\$ 906.40



State Association Directors & Officers

USBC is pleased to continue to make available Directors & Officers coverage to state associations at no charge to your association. Below are the details on these insurance programs:

Directors & Officers Liability:

- **If your association completed an application for the 8-1-08-09 period, do not complete this application. Your association will be receiving a renewal application directly from The Horton Group.**
- This insurance covers lawsuits resulting from any actual or alleged "wrongful act." A "wrongful act" includes errors, omissions, and acts of negligence or breach of duty by a covered individual while performing their duties for the association.
- Individuals covered include all board members, directors, officers, employees, and volunteers.
- This is a group purchasing policy and all participating associations will share in the \$1,000,000 each claim, \$2,000,000 aggregate policy. The policy covers defense and claim costs for a covered lawsuit.
- A \$10,000 deductible applies to each claim.
- To apply for coverage, complete and follow the instructions in the Directors & Officers application.
- Policy term will run from 8-1-09 to 8-1-10 for all applications received by 9-30-09. Coverage for applications received after 9-30-09 will become effective the first of the month following receipt of the application, and will expire 8-1-10.
- Applications will not be accepted after 12-31-09.
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- A suit brought by a member when a copy of the member's letter of suspension was made public;
- A suit alleging discrimination by the association;
- A suit filed against an association because of who was awarded its tournament.

If you have questions or need assistance with these insurance programs, contact Kim Hohensee or Doug Henderson at The Horton Group, Inc. 800 242-9028, or e-mail at kim.hohensee@thehortongroup.com or doug.henderson@thehortongroup.com.

**State Associations of United States Bowling Congress
Non Profit Directors and Officers Liability New Application & Warranty Letter
Philadelphia Indemnity Insurance Company**

Instructions: Please type or print clearly. Answer ALL questions completely. This form must be completed, dated and signed by the President or Board Chairman of the association applying for this insurance.

Association Name & USBC Number: _____

Principal Address: _____

City/State/Zip: _____

Contact Person: _____ Phone #: _____ Email: _____

Total Number of Association Members: _____

Signature: _____

Printed Name & Title: _____

Date: _____

Please forward the completed application to: **The Horton Group, Inc., N19 W24101 N. Riverwood Drive, Waukesha, WI 53188.** by August 1st but no later than September 30th.

The anniversary date of coverage is August 1st. Applications received after September 30th will be effective the first of the month following receipt of the application, and will expire the following August 1st. Applications will not be accepted after December 31st. Upon acceptance of your application you will be sent a coverage confirmation document.

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