

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 11/27/2023

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

	ne terms and conditions of the policy, ertificate holder in lieu of such endors			ndorse	ment. A stat	ement on th	is certificate does not c	onfer i	ights to the	
PRODUCER					CONTACT Robert V. Nuccio					
R.V. Nuccio & Associates Insurance Brokers, Inc.				PHONE (A/C, No, Ext): (800) 364-2433 FAX (A/C, No): (818) 980-1595						
	148 Riverside Drive			E-MAIL ADDRE		@rvnuccio.		DAZAI	A DY/ALA	
	uca Lake, CA 91602			ADDICE			DING COVERAGE	ICV IV	NAIC #	
RVNA RVNA RVNA RVNA RVNA RVNA				INSURER A: Fireman's Fund Insurance Company					21873	
INSURED					INSURER B: Nationwide Life Insurance Company					
RB	RB Parent Sports Club Inc.				INSURER C:					
360 Addison Road				INSURER D :						
Riverside , IL 60546				INSURER E : RVMA RVMA RVMA					RVNA	
					INSURER F:					
CO	VERAGES CER	TIFICATE	NUMBER:	Α Ι	CVNA F	CVNA I	REVISION NUMBER:	KVN	A RVNA	
IN C E	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY INCLUSIONS AND CONDITIONS OF SUCH	QUIREMEI PERTAIN, POLICIES.	NT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	OF AN'	Y CONTRACT THE POLICIES REDUCED BY I	OR OTHER I S DESCRIBEI PAID CLAIMS.	DOCUMENT WITH RESPE	CT TO	WHICH THIS	
INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s		
Α	GENERAL LIABILITY  COMMERCIAL GENERAL LIABILITY	~	UST021067230 NANPO0062915		1/22/2024	1/22/2025	EACH OCCURRENCE DAMAGE TO RENTED PREMISES	\$	1,000,000	
	CLAIMS-MADE COCCUR	RVN	NANF 00002913		RVNA I	EVNA I	MEDICAL EXPENSE	\$	5,000	
							PERSONAL & ADV INJURY	\$	1,000,000	
	'NA RVNA RVNA RV	/NA	RVNA RVNA		A RVN/	A RVN/	GENERAL AGGREGATE	\$	2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	\$	2,000,000	
	POLICY PRO- JECT LOC	RVN.	A RVNA RVN	A I	RVNA I	EVNA I	RVNA RVNA	\$	A RVNA	
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT	\$		
	ANY AUTO	/NA	RVNA RVNA		A RVNA	A RVN/	BODILY INJURY (Per person)	\$	KVNA	
	ALL OWNED SCHEDULED AUTOS	RVN.	A RVNA RVN		RVNA I	EVNA I	BODILY INJURY (Per accident)	\$	0.0000	
	HIRED AUTOS NON-OWNED AUTOS	IN VIN	A RVNA RVN		CVIVA	CVIVA	PROPERTY DAMAGE (Per accident)	\$	A KVNA	
D1	ANA DAVNA DAVNA DA	CNLA	DAZALA DAZALA	DMM	L DAVAL	D.VAL	A DAZALA DAZAL	\$	DAZMA	
	UMBRELLA LIAB OCCUR	1.47	KYNA KYNA		1 17.4.147		EACH OCCURRENCE	\$	10.4.147-4	
	EXCESS LIAB CLAIMS-MADE	RVN.	A RVNA RVN		RVNA I	EVNA I	AGGREGATE	\$	A RVNA	
	DED RETENTION\$							\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N	/NA	RVNA RVNA		A RVNA	\ RVN/	WC STATU- TORY LIMITS ER	A	RVNA	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$		
	(Mandatory in NH) If yes, describe under	RVN.	A RVNA RVN		KVNA I	RVNA	E.L. DISEASE - EA EMPLOYEE	\$	A RVNA	
-	DESCRIPTION OF OPERATIONS below	75.1.0	23/21/2 23/21/2	153.73.1	B 19 17 1 1	BAZAL.	E.L. DISEASE - POLICY LIMIT	\$	F33731.0	
Α	Directors and Officers	/ N/A	NPODO0070985		1/22/2024	1/22/2025			\$1,000,000	
В	AD&D Medical Plus	RVN	NPOAM0047739		1/22/2024	1/22/2025			\$50,000	
Α	Sexual Misconduct Liability	14 9 141	NANPO0062915	_	1/22/2024	1/22/2025	KYDY KYDY	15, 9, 15	1,000,000	
Add 01/	cription of operations / Locations / vehicle ditional Insured: / Sexual Misconduct 22/2024 End Date: 01/22/2025	ct Liability	included. Event Descri	ption: `	Yearly COI fo	or RB Parer				
	KINA KINA KINA	KVN	A KVNA KVN			CVNA I	CVNA KVNA	KVN	A KVNA	
CE	RTIFICATE HOLDER	/N.A.	PVNA PVNA	CANC	ELLATION	DVM.	A RVNA RVN	Δ	RVNA	
Riverside Brookfield High School					SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
	3			AUTHO	RIZED REPRESEI		RVNA RVN	A.	RVNA	
Riv	erside , IL 60546			Rob	ert V. Nu	ccio <	Lobert V. Junio			