



Optional Insurance Plans for Not-for-Profit Sports Organizations

Plan 1: Directors & Officers/Employment Practices Liability Insurance

RPS Signature Programs combined plan of Directors & Officers (D&O) liability and Employment Practices Liability insurance (EPLI) provides protection for lawsuits stemming from actual or alleged wrongful acts, and errors and omissions against the directors and officers of not-for-profit sports organizations, as well as their employees and volunteers. The policy provides protection for suits brought against the sports organization as an entity, as well as individuals, whether paid or not, who are acting in an official capacity on behalf of the organization.

Coverage Description and Policy Limit Options

Option 1) \$1 million per claim/\$1 million per policy term

| | |
|--------------------------|--------------------------------|
| Retention: | \$0 |
| Defense costs: | Inside the Limits of Liability |
| Option 1 annual premium: | \$650 |

Option 2) \$2 million per claim/\$2 million per policy term

| | |
|-------------------------|--------------------------------|
| Retention: | \$0 |
| Defense costs: | Inside the Limits of Liability |
| Option 2 annual premium | \$1,130 |

**Premium may vary from the below amounts, but will never exceed or be outside of a 1% variance of the amounts indicated below.

This plan does not provide coverage for lawsuits involving bodily injury or property damage. Those types of claims are meant to be covered under the organization's general liability policy.

Please note: This coverage is written on a claims-made basis. All claims under this policy must be reported to the insurance company within the policy term in order to be eligible for coverage.

Examples of Directors & Officers/Employment Practices Liability Claims Scenarios

- **Discrimination:** Lawsuits alleging discrimination can arise when a league chooses one coach over another, or when selecting players for elite or all-star teams.
- **Wrongful suspension/dismissal:** How the organization disciplines or terminates coaches, players or even board members, when they violate the code of behavior, can often result in a lawsuit.
- **Acting beyond authority:** In the event, a coach, board member or volunteer makes decisions beyond their authority, a lawsuit may arise. Even in cases where they are simply enforcing existing rules, people who don't like those rules can file a lawsuit.

For-profit organizations are not eligible for coverage under this program. Contact RPS Signature Programs for a quote.

Plan 2: Crime Insurance

This plan provides protection for sports organizations against the financial loss caused by the dishonest disappearance of money, securities or financial instruments. The crime insurance program has been designed to cover the exposures of today's sports organizations, including coverages like computer fraud and social engineering fraud, whether the crime is committed by an officer, volunteer or employee. The policy includes the following package of coverages.

Crime Insurance Policy Limits and Details

| | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| Employee dishonesty: | \$25,000 per loss |
| Covers financial loss by employee or volunteer through theft or forgery | |
| Theft (on-premises/off-premises): | \$10,000 per loss |
| Covers financial loss from robbery or burglary on-/off-premises | |
| Depositors forgery coverage: | \$10,000 per loss |
| Protects losses due to forgery or alteration of checks or drafts | |
| Computer fraud coverage: | \$10,000 per loss |
| Protects loss to financial instruments and inventory as a result of a hacking event or electronic fraud | |
| Funds transfer coverage: | \$10,000 per loss |
| Covers loss due to transfer of money or securities based on fraudulent documentation allegedly sent by your organization | |
| Client coverage: | \$10,000 per loss |
| Extends coverage to include loss of money or securities to a third party for which your organization is legally liable | |
| Social engineering fraud: | \$10,000 per loss |
| Covers financial loss due to deception, impersonation and other fraudulent or scam scenarios, such as a hacker posing as a vendor who redirects your payment to their bank account | |
| Expense limits: | \$5,000 per loss |
| Pays for auditors' fees or investigation costs to identify losses | |
| Retention (deductible): | \$250 per claim |

Crime Insurance Annual Premium

| | |
|-----------------------------------------------------------------------------------|--------------|
| Option 1) Limits as shown | \$260 |
| Option 2) Increase employee dishonesty to \$50,000; other limits as shown | \$326 |
| Option 3) Increase employee dishonesty to \$100,000; other limits as shown | \$392 |

Please note: This policy does not cover the loss of equipment or other association/club property. Consult with your agent if you own property or equipment that needs to be insured.

OFFICE LOCATION

200 Jefferson Park, Whippany, NJ 07981
PO Box 1322, Morristown, NJ 07960
Phone: 800.446.5311 | Fax: 973.921.8474

RPSins.com/SignaturePrograms

Additional Details Regarding the D&O/EPLI and Crime Insurance Plans

- These plans may be purchased by teams, clubs, chapters or local sports organizations.
- Sports associations that are regional, statewide or national in scope must be individually underwritten and priced by RPS Signature Programs.
- Commercial general liability must be in force in order to purchase the D&O/EPLI insurance through this program.
- D&O and crime plans are available only to not-for-profit associations. If your organization is for-profit, please contact RPS Signature Programs.

Insurance carrier: These policies are underwritten by the Chubb Group of Insurance Companies, Warren, New Jersey. Chubb is rated "A++" (Superior) by A.M. Best.

Important note: This brochure provides a summary of available insurance coverages. It is not an insurance policy. Please see the actual insurance policies, together with their declaration pages and endorsements, for a complete recitation of the terms, conditions and exclusions. These policies are subject to the laws of the jurisdiction in which they are issued.

If you are a resident of New Jersey, Florida or Kentucky, please be advised that state surcharges and/or taxes may apply to orders for D&O liability insurance.

Organizations in Washington state, please contact us for a different application.

Organizations in Vermont, Wyoming and Alaska are subject to surplus lines tax. Please contact RPS Signature Programs for more information if your organization is domiciled in any of the above states.

Contact us at SportService@RPSins.com.

All policies are annual terms and are billed directly by the carrier (Ace/Chubb).

No payment is to be sent to RPS Signature Programs.

The information contained herein is offered as insurance industry guidance and provided as an overview of current market risks and available coverages and is intended for discussion purposes only. This publication is not intended to offer legal advice or client-specific risk management advice. Any description of insurance coverages is not meant to interpret specific coverages that your company may already have in place or that may be generally available. General insurance descriptions contained herein do not include complete insurance policy definitions, terms, and/or conditions, and should not be relied on for coverage interpretation. Actual insurance policies must always be consulted for full coverage details and analysis.
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Enrollment Form: Optional Insurance Plans for Sports Associations

Contact Name: _____ Title: _____

(Must be an officer of the association or club)

Association/Club Name: _____

Association/Club Mailing Address: _____

City: _____ State:* _____ ZIP: _____

Phone: _____ Email: _____

Nature of Operations: _____

*Organizations in Washington, please contact us for a different application. Organizations in Alaska, Vermont and Wyoming are subject to surplus lines tax in this program.
Please contact RPS Signature Programs for more information if your organization is domiciled any of the above states.

This section must be completed for all Chubb insureds (D&O or crime).

This enrollment form is for: New coverage Renewal coverage

Association is: For-profit* Not-for-profit | Tax-Exempt Status (Required): _____ (ex. 501c3, 501c4, etc.)

*For-profit entities are not eligible to purchase this coverage and must contact us for information on underwriting their specific organization.

Please list: _____ # of employees _____ # of members _____ # of adult volunteers _____ # of players

Financial Information.

Attach a copy of your audited financial statement or complete the following.

Gross Annual Revenues: \$ _____ Total Assets: \$ _____

This section must be completed for all new Chubb insureds: Prior acts exclusion acknowledgment.

No person proposed for this coverage is aware of facts or circumstances that they have reason to suppose might give rise to a future claim, with the exception of (choose one): **None** (no known circumstances) or Describe circumstance(s) below

It is agreed that if such facts or circumstances exist, whether or not disclosed, any claim arising from such facts or circumstances is excluded from this proposed coverage.

Please check the plans you are purchasing.

Premium may vary from the below amounts, but will never exceed or be outside of a 1% variance of the amounts indicated below.

| D&O/EPLI | | Crime | |
|--------------------------------|---------|--------------------------------------------------|-------|
| A. Option 1: \$1 million limit | \$650 | C. Option 1: \$25,000 employee dishonesty limit | \$260 |
| B. Option 2: \$2 million limit | \$1,130 | D. Option 2: \$50,000 employee dishonesty limit | \$326 |
| | | E. Option 3: \$100,000 employee dishonesty limit | \$392 |

Two Ways to Apply for or Renew Optional Insurance.

1. By email: Complete the application and email to RPS Signature Programs at SportService@rpsins.com.
2. By mail: Send the completed application to PO Box 1322, Morristown NJ 07960.

An invoice will be mailed from the carrier (Chubb/Ace) with instructions on payment; do not send payment to RPS Signature Programs. RPS Signature Programs will send a copy of the policy electronically to the contact listed above once available.

Verification: By signing this enrollment form, I hereby verify that all information provided is true and correct. If applying for D&O/EPL coverage, I hereby verify that commercial general liability is in force for the association/club listed above.

Signature of Association/Club Officer: _____ Date: _____

