

**2015 US Lacrosse
 Event Insurance Plans Application**

Day Camp Overnight Camp One Day Clinic Tournament/Exhibition Game **Special Event/Fundraiser**

EVENT INFORMATION

Event Name _____

Specific Dates of Event _____

Contact Name _____

Contact Mailing Address _____

Event Location Address _____

Contact Phone _____ **EMAIL** _____

ADDITIONAL INSURED CERTIFICATE INFORMATION (if required by Facility Owner)

Please provide full name and address. Certificates will be emailed to you unless otherwise indicated

1.) _____

2.) _____

Age Category	Total Number of Participants	Number of Teams for Tournaments	Total Number of Weeks for Camps	Select Rate Shown of Table	Total Premium
Youth				\$	\$
High School				\$	\$
Adult Men				\$	\$
Adult Women				\$	\$

Minimum Premiums	
Day Camps	\$250.00
Overnight Camps	\$400.00
One Day Clinic	\$125.00
Tournaments	\$250.00
*Special Event	\$150.00

Total all Premiums \$ _____

Subject to Minimum Premium \$ _____

USL Admin Fee \$ _____

Total Payment Due \$ _____

METHOD OF PAYMENT

Check _____ Amount Enclosed _____

Please make checks payable to "RPS Bollinger".

If you would like to purchase the coverage with a credit card, please visit www.BollingerLax.com, under Buy Additional Insurance.

Questions? – Contact RPS Bollinger at 800.446.5311 then press 5 for Lacrosse or email Lacrosse@RPSins.com

***Please contact RPS Bollinger for Special Events/Fundraisers as additional underwriting is required**

2015 US Lacrosse Event Insurance Plan Premium Calculation Table

The Event Insurance Plans are only for events that you are hosting. The coverage does not follow you while you are participating in other events regardless of whether or not you have entered those dates into the calendar.

DAYCAMPS *Rate per week*

# of Campers	Youth	High School	Adult Men	Adult Women	USL Admin Fee
50 or Fewer	\$50	\$100	\$185	\$125	\$25
51 to 100	\$125	\$150	\$375	\$225	\$35
101 to 250	\$250	\$275	\$750	\$450	\$60
Over 250	\$400	\$450	\$1,300	\$900	\$125
A \$250 minimum premium applies per Camp plus the USL Admin Fee.					

OVERNIGHT CAMPS *Rate per week*

# of Campers	Youth	High School	Adult Men	Adult Women	USL Admin Fee
50 or Fewer	\$100	\$175	\$370	\$250	\$50
51 to 100	\$250	\$300	\$750	\$450	\$75
101 to 250	\$550	\$550	\$1,500	\$900	\$125
Over 250	\$900	\$900	\$2,600	\$1,800	\$175
A \$400 minimum premium applies per Camp plus the USL Admin Fee.					

ONE DAY CLINICS | INSTRUCTIONAL CLASSROOM *Rate per day*

# of Attendees	Youth	High School	Adult Men	Adult Women	USL Admin Fee
Under 250	\$125	\$125	\$125	\$125	\$25
Over 250	\$175	\$175	\$200	\$200	\$50
Total Cost per Clinic = Rate above plus the USL Admin Fee					

TOURNAMENTS and EXHIBITION GAME *Rate per Team*

Rates are per Team, per Tournament	Youth	High School	Adult Men	Adult Women
Rate per Team	\$15	\$20	\$50	\$30
Admin Fee*	< 50 \$35	51-100 \$75	101-250 \$125	Over 250 \$150

**Fee is based on total # of Participants in Tournament. All Tournament Teams must be covered by this plan.*

A \$250 minimum premium applies per Tournament, plus the USL Admin Fee.

SPECIAL EVENT/FUNDRAISER

A \$150 minimum premium applies per Special Event/Fundraiser plus a \$25 USL Admin Fee.

The Event Insurance Plans are only for events that you are hosting. The coverage does not follow you while you are participating in other events regardless of whether or not you have entered those dates into the calendar.

Instructions: *Programs are covered on a Blanket Basis, whether or not participants or teams are registered USL Members.*

1. Complete this form and send it with your premium payment to RPS Bollinger. Full payment must be received by RPS Bollinger at least 5 business days prior to your event.
2. Use the Premium Calculation tables above to calculate your programs specific premium. Information should be used to complete the application form. Start by either estimating the number of participants for Day/Overnight Camps and Clinics, or teams for Tournaments. Use this number under the “# of Participants” column on the application.
3. If applicable, enter on the application the # of weeks for your Day Camp or Overnight Camp in the “# of Weeks” column. Seven sessions of play or fewer, counts as one whole week. Sessions of play may be consecutive or held once a week for multiple weeks.
4. Using the appropriate Premium Calculation Table above, find the rate that corresponds to the age group(s) and # of participants/teams in your program. Enter that rate on the application under the “Select Rate” column.
5. For Day Camps and Overnight Camps, multiply the # of weeks by the Selected Rate per Week to determine the subtotal premium for each age group. Write this amount in the “subtotal” column of the application. For Tournaments, multiply the number of teams by the Selected Rate per Week to determine the subtotal premium for each age group. Write this number in the “subtotal” column.
6. If the total of all premiums is less than the program’s minimum premium, then the minimum premium will apply (the USL Administration fee is not included in the minimum premium).
7. Add in the Administrative fee for US Lacrosse, shown in the right hand column for each rate table, to arrive at the Total Payment Due. (The Administration fee goes to US Lacrosse to sponsor research by the USL Sport Science & Safety Committee). Calculate this fee based on the number of participants.
8. Send payment with this form to: US Lacrosse Insurance Programs c/o RPS Bollinger, PO Box 390 Short Hills, NJ 07078. Please make checks payable to “RPS Bollinger”. Allow 5 business days for processing.
9. Please submit a roster of all participants (including names & addresses) to RPS Bollinger within 5 business days after your event for claims verification purposes. Claims can only be paid if there is a roster on file. Rosters are mandatory regardless of any impending claims.
10. Please include your email address on the application as the certificates are transmitted to you in that manner.
11. Coaches are still required to be members of US Lacrosse for coverage.

Questions? Call RPS Bollinger at 800.446.5311 then press 5 for Lacrosse or email Lacrosse@RPSins.com
Fax: 973.921.2876 Attention: Lacrosse Representative