

CERTIFICATE OF LIABILITY INSURANCE

DATE 3/1/2017 R1

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 the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

The policies referenced by this Certificate are issued by a Risk Retention Group and state: **"NOTICE: This policy is issued by your risk retention group. Your risk retention group may not be subject to all of the insurance laws and regulations of your state. State insurance insolvency guaranty funds are not available for your risk retention group."**

PRODUCER Recreation Risk Retention Group, Inc. 126 College St., Ste 400 Burlington, VT 05401	CONTACT NAME: Tim Herr PHONE: 802-383-1541 FAX: EMAIL ADDRESS: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 80%;">INSURER(S) AFFORDING COVERAGE</th> <th style="width: 20%;">NAIC#</th> </tr> <tr> <td>INSURER A: Recreation Risk Retention Group, Inc.</td> <td style="text-align: center;">15905</td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC#	INSURER A: Recreation Risk Retention Group, Inc.	15905	INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC#														
INSURER A: Recreation Risk Retention Group, Inc.	15905														
INSURER B:															
INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															
INSURED United States Hang Gliding and Paragliding Association PO Box 1330 Colorado Springs, CO 80901															

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 REQUIREMENT, TERM OR CONDITION 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 THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS												
A <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY INCLUDING PARTICIPANT LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> \$2,500 DEDUCTIBLE Per Occur GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOCATION	X		MAGL00001001-R1	3/1/2017	3/1/2018	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">EACH OCCURRENCE</td> <td style="text-align: right;">1,000,000</td> </tr> <tr> <td>DAMAGE TO RENTED PREMISES (Ea Occurrence)</td> <td style="text-align: right;">50,000</td> </tr> <tr> <td>MED EXP (Any one person)</td> <td style="text-align: right;">1,000</td> </tr> <tr> <td>PERSONAL & ADV INJURY</td> <td style="text-align: right;">EXCLUDED</td> </tr> <tr> <td>GENERAL AGGREGATE</td> <td style="text-align: right;">2,000,000</td> </tr> <tr> <td>PRODUCTS - COMP/OP AGG</td> <td style="text-align: right;">EXCLUDED</td> </tr> </table>	EACH OCCURRENCE	1,000,000	DAMAGE TO RENTED PREMISES (Ea Occurrence)	50,000	MED EXP (Any one person)	1,000	PERSONAL & ADV INJURY	EXCLUDED	GENERAL AGGREGATE	2,000,000	PRODUCTS - COMP/OP AGG	EXCLUDED
EACH OCCURRENCE	1,000,000																	
DAMAGE TO RENTED PREMISES (Ea Occurrence)	50,000																	
MED EXP (Any one person)	1,000																	
PERSONAL & ADV INJURY	EXCLUDED																	
GENERAL AGGREGATE	2,000,000																	
PRODUCTS - COMP/OP AGG	EXCLUDED																	
REINSURANCE PROVIDED BY CERTAIN UNDERWRITERS AT LLOYD'S (A.M. BEST RATING: A(EXCELLENT) XV)																		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES

ADDITIONAL INSURED: State of Texas, Texas Parks and Wildlife Dept., 4200 Smith School Rd., Austin, TX 87344

LOCATION(S):
 Franklin Mountains State Park - Agave Hill Launch: 31.913033, -106.506967, El Paso, TX;
 Franklin Mountains State Park - Main LZ: 31.910659, -106.519001, El Paso, TX;
 Franklin Mountains State Park - Lee's Lookout Launch: 31.877933, -106.500250, El Paso, TX;
 Franklin Mountains State Park - Nelson's Launch: 31.872852, -106.498522, El Paso, TX;
 Franklin Mountains State Park - North Mount Franklin Launch: 31.902917, -106.493700, El Paso, TX;
 Franklin Mountains State Park - Alt Nelson's LZ: 31.876043, -106.518821, El Paso, TX

DESCRIPTION: The ADDITIONAL INSURED is provided coverage under **Coverage A - Bodily Injury and Property Damage Liability; Coverage C - Medical Payments; and Coverage D - Hang Gliding and Paragliding Participant Injury Liability** for occurrences at the above scheduled **LOCATION(s)** arising out of the hang gliding and paragliding operations of the above named **INSURED**, the below designated **CERTIFICATE HOLDER** and their respective Members. **NO COVERAGE IS AFFORDED FOR ANY OPERATIONS CONDUCTED FOR-HIRE OR FOR ANY TYPE OF COMPENSATION.**

CERTIFICATE HOLDER	CANCELLATION
---------------------------	---------------------

USHPA Chapter 41 Rio Grande Soaring Association, Inc. 5134 Thornton St El Paso, TX 79932	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
---	---

CERTIFICATE OF LIABILITY INSURANCE

DATE 3/1/2017 R1

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 the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

The policies referenced by this Certificate are issued by a Risk Retention Group and state: **"NOTICE: This policy is issued by your risk retention group. Your risk retention group may not be subject to all of the insurance laws and regulations of your state. State insurance insolvency guaranty funds are not available for your risk retention group."**

PRODUCER Recreation Risk Retention Group, Inc. 126 College St., Ste 400 Burlington, VT 05401	CONTACT NAME: Tim Herr	
	PHONE: 802-383-1541	FAX:
	EMAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
INSURED United States Hang Gliding and Paragliding Association PO Box 1330 Colorado Springs, CO 80901	INSURER A: Recreation Risk Retention Group, Inc.	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

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 REQUIREMENT, TERM OR CONDITION 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 THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY INCLUDING PARTICIPANT LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> \$2,500 DEDUCTIBLE Per Occur GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOCATION	X		MAGL00001001-R1	3/1/2017	3/1/2018	EACH OCCURRENCE
						1,000,000
						DAMAGE TO RENTED PREMISES (Ea Occurrence)
						50,000
						MED EXP (Any one person)
						1,000
PERSONAL & ADV INJURY						
EXCLUDED						
GENERAL AGGREGATE						
2,000,000						
PRODUCTS - COMP/OP AGG						
EXCLUDED						


REINSURANCE PROVIDED BY CERTAIN UNDERWRITERS AT LLOYD'S (A.M. BEST RATING: A(EXCELLENT) XV)

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES

ADDITIONAL INSURED: City of Alamogordo, 1376 E Ninth St., Alamogordo, NM 88310

LOCATION(S): Dry Canyon - LZ : 32.928433, -105.945367, Alamogordo, NM

DESCRIPTION: The **ADDITIONAL INSURED** is provided coverage under **Coverage A - Bodily Injury and Property Damage Liability**; **Coverage C - Medical Payments**; and **Coverage D - Hang Gliding and Paragliding Participant Injury Liability** for occurrences at the above scheduled **LOCATION(s)** arising out of the hang gliding and paragliding operations of the above named **INSURED**, the below designated **CERTIFICATE HOLDER** and their respective Members. **NO COVERAGE IS AFFORDED FOR ANY OPERATIONS CONDUCTED FOR-HIRE OR FOR ANY TYPE OF COMPENSATION.**

CERTIFICATE HOLDER USHPA Chapter 41 Rio Grande Soaring Association, Inc. 5134 Thornton St El Paso, TX 79932	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
--	--