

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

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).

Rainprotection Insurance 39 Ryder Avenue Dix Hills, NY 11746 www.Rainprotection.net		CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS:		FAX (A/C, No):	
			INSURER(S) AFFORDING COVERAGE	NAIC#	
		INSURER A:	Insurance Company Name		
INSURED	SPORTS AND RECREATION PROVIDERS ASSOCIATION (PURCHASING GROUP) AND ITS PARTICIPATING MEMBERS:	INSURER B:			
	115 PARTICIPATING MEMBERS:	INSURER C:			
Exhibitor Name Street City, State, Zip Code		INSURER D:			
		INSURER E:			
		INSURER F:			

COVERAGES CERTIFICATE NUMBER:

REVISION NUMBER:

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, EXPLISIONS AND CONDITIONS OF SLICH POLICIES LIMITS SHOWN MAY HAVE BEEN BEDLICED BY PAID OF ALMS

ΕX	EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.										
INSR LTR			SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS				
	GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER:			Policy Number	10/20/2025	10/23/2025	GENERAL AGGREGATE	\$ 2,000,000			
A							PRODUCTS - COMP/OP AGG	\$ 2,000,000			
							PERSONAL & ADV INJURY	\$ 1,000,000			
							EACH OCCURRENCE	\$ 1,000,000			
							FIRE DAMAGE (Any one fire)	\$ 50,000			
	X POLICY PRO- JECT LOC										
	AUTOMOBILE LIABILITY	Ц					COMBINED SINGLE LIMIT (Fa accident)	\$			
	ANY						DDILY INJURY (Per person)	\$			
	ALL SCHEDULED AUTOS						DDILY INJURY (Per accider				
	HIRED AUTO NON-OWNED AUTOS						OPERTY DAMAGE er accident)	\$			
		\									
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE	\$			
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$			
	DED RETENTION \$							\$			
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N							WC STATU- TORY LIMITS OTH - ER	\$			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?						E.L. EACH ACCIDENT	\$			
	(Mandatory in NH)						E.L. DISEASE - EA EMPLOYEE	\$			
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$			
							AD&D MAXIMUM MEDICAL				
							DEDUCTIBLE				
DEG	CRIPTION OF OPERATIONS / LOCATIONS / VEH	101 50	(844-	h A CODD 404 A delitioned Demonstra			TERMS OF PAYMENT				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Additional Insured: National Association of Broadcasters, Jacob K. Javits Convention Center and Freeman. As respects to claims arising out of the operations of the Exhibiting Company at NAB Show New York 2025.

CERTIFICATE HOLDER

CANCELLATION

National Association of Broadcasters

1 M Street SE, Washington DC 20003

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

Rainprotection Insurance