CERTIFICATE OF INSURANCE				PRINT DATE:	2/27/2025			
				<b>CERTIFICATE NUMBER:</b> 202502271112640				
AGENCY:								
Edgewood Partners Insurance Center 5909 Peachtree Dunwoody Road, Suite 800 Atlanta, GA 30328 678-324-3300 (Phone), 678-324-3303 (Fax)				CONFERS	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.			
NAMED INSURED:				INSURER	INSURERS AFFORDING COVERAGE:			
USA Track & Field, Inc. 130 East Washington Street, Suite 800 Indianapolis IN 46204				INSURER	INSURER A: Clear Blue Insurance Company NAIC #28860			
EVENT INFORMATION:								
Wasatch Back 2025 (6/12/2025 - 6/14/2025)								
POLICY/COVERAGE INFORMATION:								
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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.								
INS	TYPE OF INSURANCE:	POLICY NUMBER(S):	EFFECTIVE:	EXPIRES:	LIMITS:			
Α	GENERAL LIABILITY							
	X Occurrence	CZ26INGL0001-02		11/1/2025 12:01 AM	GENERAL AGGREGATE (	Per Event)	\$4,000,000	
	X Participant Legal Liability			12:01 AM	EACH OCCURRENCE		\$2,000,000	
	<u> </u>				DAMAGE TO RENTED PR	EMISES (Each Occ.)	\$2,000,000	
					MEDICAL EXPENSE (Any	,	EXCLUDED	
					PERSONAL & ADV INJUR	. ,	\$2,000,000	
					PRODUCTS-COMP/OP AG		\$2,000,000	
							\$2,000,000	
A	UMBRELLA/EXCESS LIABILITY							
	X Occurrence	CZ27IN3X0001-02	11/1/2024 12:01 AM	11/1/2025 12:01 AM	EACH OCCURRENCE		\$3,000,000	
					AGGREGATE		\$3,000,000	
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS:								
Coverage applies to USA Track & Field sanctioned events and registered practices, including any directly related activities, such as event set-up and tear-down, participant check-in and award ceremonies.								
The certificate holder is an additional insured per the following endorsement: Blanket Additional Insured (CB 03 03)								
The General Liability policy is primary and non-contributory with respect to the negligence of the Named Insureds (Form CG 20 01)								
The General Liability policy contains a blanket Waiver of Subrogation as required by contract per Waiver of Transfer of Rights of Recovery Against Others (Form CG 24 04).								
Excess policy follows form of underlying General Liability.								
CERTIFICATE HOLDER: NOTICE OF CANCELLATION:								
Weber County 2380 Washington Blvd Ogden UT 84401					Should any of the above described policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions.			
				AUTHORI	AUTHORIZED REPRESENTATIVE:			
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