

Texas Amateur Athletic Federation 2025 Insurance Program

Effective January 1, 2025 - January 1, 2026

The following information references coverage contained in the Texas Amateur Athletic Federation (T.A.A.F.) insurance policy (subject to all terms, conditions and exclusions), and it is the property of T.A.A.F. The contact person on the enrollment form will receive a certificate of insurance for proof of coverage, and a copy is available only by written request to T.A.A.F. COVERAGE:

COVERAGE.	
Commercial General Liability Insurance	
Commercial General Liability General Aggregate Limit	\$2,000,000
Products/Completed Operations Aggregate Limit	\$2,000,000
Personal & Advertising Injury Limit	\$1,000,000
Each Occurrence Limit	\$1,000,000
Fire Damage Legal Limit (any one fire)	\$ 300,000
Medical Payments Limit	\$ 5,000
(Liability insurance only available for: Golf, tennis, swim, track, cheer, volleyball, baseball,	
softball, basketball, flag football, kickball)	
Participant Accident Insurance	
Accidental Death & Dismemberment	\$ 5,000
Excess Medical & Dental Expense (Maximum Per Claim)	\$ 25,000
Deductible per Claim	\$ 250
(Accident insurance available for: Golf, tennis, swim, track, gymnastics, cheer, volleyball, baseball, softball, basketball, flag football, kickball)	

EXCLUSIONS/CONDITIONS:

Notable exclusions, including, but not limited to; and in addition to all other policy terms, conditions and exclusions, include:

- 1) T.A.A.F. events/activities scheduled, sanctioned, supervised ONLY, scheduled, submitted sports/venues ONLY, premises/public/participants ONLY, liability/accident insurance quotation ONLY (NOT: worker compensation/employer liability; buildings/contents/equipment, cancellation-interruption/income-expense, automobile, director/officer liability nor other insurance/operation but other insurance/ operation available by application/quotation)
- 2) Accident eligibility <u>includes</u> participants, coaches, managers and <u>excludes</u> war; terrorism; military service; worker compensation; drugs; narcotics; alcohol; eyewear; dentures; etc;
- 3) Liability coverage <u>includes</u> participant legal liability and <u>excludes</u> abuse/molestation; assault/battery; asbestos; nuclear energy; total fireworks/pyrotechnics; employment-related practices; temporary structures collapse; broad form securities; stunt activities; trampolines; cheerleading pyramids; war; terrorism; total pollution; whitewater rafting; bungee jumping; mountain/rock climbing; all motorsports; lead liability; professional liability; athletic equipment manufacture/sale/distribution; sauna/tanning devices/usage; polo; skin/scuba diving; squash; rodeo/ equestrian-related sports; waterslides; ballooning; parachute jumping; luge; tobogganing; gymnastics; snow/water skiing; all communicable diseases (especially: hepatitis, TSE, HIV, HTLV, AIDS); organic pathogens; punitive damages; personal/advertising, injury limitation; Telephone Consumer Protection Act or CAN-SPAM Act violation; expected or intended injury; fungi or bacteria; aircraft, automobile or watercraft; etc and all claims for boxing athletic participants.
- For all participants, risk management requirements <u>include</u>, but not limited to, insured rules, requirements AND proper execution of waiver form

INDIVIDUAL- Golf, Tennis, Swimming, Track & Field, Kickball	\$ 9.00	
INDIVIDUAL- Gymnastics (Participant accident coverage only)	\$ 7.50	
TEAM - Volleyball, Baseball, Softball, Basketball, Soccer, Flag Football	\$ 80.00	
UMPIRES, OFFICIALS, REFEREES AND COACHES	Available thru T.A.A.F.	
(For T.A.A.F. League/Events)	training, certification &	
	registration programs	
VENUE OWNER LIABILITY - League (Single sport)	\$ 455.00	
All Teams MUST be registered with T.A.A.F. for claims to be accepted		
VENUE OWNER LIABILITY - League (Multi-sport)	\$ 415.00/sport	
All Teams MUST be registered with T.A.A.F. for claims to be accepted		
VENUE OWNER LIABILITY - Tournament (3 day maximum)	\$ 175.00	

Fees listed are for insurance only. Registration fees are NOT included. Coverage is for the calendar year of 2022. Officials will be covered while officiating for T.A.A.F. sanctioned events only. All teams and individuals participating in a league or season must be registered with T.A.A.F. and be participating in T.A.A.F. scheduled, supervised, "sanctioned" activities ONLY. This is NOT 24 hour/7 days per week coverage. It is for T.A.A.F. activities only. For the 24 hour/7 days per week coverage, venue owners must have primary premises liability insurance. Certificates of insurance issued to teams or leagues only.

Waivers must accompany an insurance enrollment form for **each individual participant** to be insured. **Teams** requesting insurance must include the completed (signed) team roster (with waiver on back) to be insured.

Fees should be included with insurance enrollment.

Email: mark@taaf.com or accounting@taaf.com

Texas Amateur Athletic Federation

2025 Insurance Enrollment Form (Effective January 1, 2025 – January 1, 2026)

T.A.A.F. Membe	er City / Affiliate Member:					
Mailing address:	:					
City, State & Zip	:					
Contact Person:	Telephone:_	Email:				
Sport:	Activities/Location:					_
 Individual 	erage requested: Sport Athlete–other than gymnastics – coverage only	#	X	\$9.00 =	-	
•	cs- (accident coverage only)	#	X	\$7.50 =	-	
must be regi	orts Athlete Accident Insurance – (team stered with TAAF and athletes must be ter for coverage)	#	X	\$80.00 =	-	
4	. Officials, coaches: Included in T.A.A.F. (Accident only - must be with T.A.A.F. for claims	a T.A.A.F. le to be accept	eague – All Tea ed)	ıms MUST be	registered	on
	Before 9/01/2025 #\$12	2 After 9/0)1/2025 #		X \$7	
5	. Venue Owner Liability -	#	X \$	455.00	= .	
	League (single sport) - All Teams MUST be	registered v	vith T.A.A.F. fo	r claims to b	e accepted	
6		#X \$415.00/sport= MUST be registered with T.A.A.F. for claims to be accepted				
			_,			
7	. Venue Owner Liability - Tournament (3 day max) Tournament name: Tournament date:	#				
Т	otal Premium due:				-	
automatically; pl	ed (venue owners and / or lessors of premease list additional insured that require abou (ie, facility owner, sponsor).					
Name					_	
Address					<u> </u>	

Completed **enrollment form and full premium payment** should be sent to: