ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/1/2010

PRODUCER (260)467-5690 FAX: (260)467-5651
STAR Insurance - Fort Wayne Office
2130 East DuPont Road

Fort Wayne   IN 46825

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.

INSURED
ROAD RUNNERS CLUB OF AMERICA/2010
AND ITS MEMBER CLUBS
7410 SKYLINE DRIVE
FREDERICK   MD 21702-3652

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: NATIONAL CASUALTY COMPANY	11991
INSURER B: NATIONWIDE LIFE INS. CO.	66869
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

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.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		**GENERAL LIABILITY** [X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS MADE [X] OCCUR [X] LEGAL LIAB.TO PART. $1,000,000 GEN'L AGGREGATE LIMIT APPLIES PER [ ] POLICY [ ] PROJECT [ ] LOC	KRO 0000000754800 A&M AGGREGATE $5,000,000	12/31/2009 12:01 A.M.	12/31/2010 12:01 A.M.	EACH OCCURRENCE / DAMAGE TO RENTED PREMISES (Ea occurrence) / MED EXP (Any one person) / PERSONAL & ADV INJURY / GENERAL AGGREGATE / PRODUCTS - COMP/OP AGG / A&M & MOLESTATION	$ 1,000,000 / $ 500,000 / $ 5,000 / $ 1,000,000 / $ NONE / $ 1,000,000 / 500,000
A		**AUTOMOBILE LIABILITY** [ ] ANY AUTO [ ] ALL OWNED AUTOS [ ] SCHEDULED AUTOS [X] HIRED AUTOS [X] NON-OWNED AUTOS	KRO 0000000754800	12/31/2009 12:01 A.M.	12/31/2010 12:01 A.M.	COMBINED SINGLE LIMIT (Ea accident) / BODILY INJURY (Per person) / BODILY INJURY (Per accident) / PROPERTY DAMAGE (Per accident)	$ 1,000,000 / $ / $ / $
		GARAGE LIABILITY [ ] ANY AUTO				AUTO ONLY - EA ACCIDENT / OTHER THAN EA ACC / AUTO ONLY: AGG	$ / $ / $
		EXCESS/UMBRELLA LIABILITY [ ] OCCUR [ ] CLAIMS MADE [ ] DEDUCTIBLE [ ] RETENTION				EACH OCCURRENCE / AGGREGATE	$ / $ / $ / $ / $
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS / OTHER / E.L. EACH ACCIDENT / E.L. DISEASE - EA EMPLOYEE / E.L. DISEASE - POLICY LIMIT	$ / $ / $
B		OTHER **EXCESS ACCIDENT & MEDICAL**	SPX 0000003732100	12/31/2009 12:01 A.M.	12/31/2010 12:01 A.M.	EXCESS MEDICAL / $250 DEDUCTIBLE / AD & SPECIFIC LOSS	$10,000 PER CLAIM / $2,500

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
CERTIFICATE HOLDER IS NAMED AS AN ADDITIONAL INSURED AS RESPECTS THEIR INTEREST IN THE OPERATIONS OF THE NAMED INSURED.
DATE & EVENT: 04/03/10 - 11/25/10 various dates and events. See attached addendum.
INSURED CLUB: Black Hills Runners Club, Attn: Lesley Warren; P.O. Box 1713, Rapid City, SD 57709

CERTIFICATE HOLDER	CANCELLATION
City of Rapid City Department of Parks and Recreation 300 Sixth Street Rapid City, SD 57701	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. **AUTHORIZED REPRESENTATIVE** John Lefever/JWE

ACORD 25 (2001/08)
INS025 (0108) 08a

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