

Summary of Liability Insurance Protection

for Charter Clubs, Chapters, and Sanctioned Events

This summary of insurance coverages is merely descriptive and should be used for familiarization and general reference purposes only. For specific policy information including coverage exclusions, limitations for conditions, copies of master policy(s) can be downloaded at www.modelaircraft.org¹.

The General Liability Insurance policy coverage for chartered clubs, chapters, designated site owners and sanctioned event sponsors is effective March 31 each year, subject to the terms and conditions of the policies issued by Westchester Surplus Lines Insurance Company. These insurance policies provide legal liability coverage for AMA chartered clubs, chapters, and sanctioned events if they are sued or claimed to have been negligent in causing bodily injury or property damage. Coverage for liability arising from club modeling operations is also extended to designated site owners who are issued an official Certificate of Insurance as evidence of coverage. Policy benefits include assignment of legal counsel and payment of legal cost related to the investigation, defense or settlement of a covered claim and payment of bodily injury, property damage or limited personal injury (libel, slander, defamation, invasion of privacy) settlements or judgements up to the limits of the policy. Clubs, chapters and sanctioned event sponsors are provided this liability insurance as excess of any other coverage for accidents; however, coverage for designated site owner(s) is primary.

Club officers, contest directors of sanctioned events, and other volunteer worker(s) for AMA, while acting at the direction of, and within the scope of their duties for AMA, are afforded primary liability coverage under this policy. The insurance industry calls this the "vicarious liability" for the acts of others or accidents caused by others.

The maximum per occurrence limit of coverage available by this policy is \$2,500,000 involving bodily injury, personal injury and/or property damage with an overall limit of \$5,000,000 in the aggregate. These limits are for claims occurring during the policy period. Model cars, boats and rockets are included. Property damage liability coverage is subject to a \$250 per claim deductible payable by the club or sanctioned event. The deductible does not apply to bodily injury. There is no coverage for damage caused to models. Liability coverage is not provided under the policy for AMA members in suits or claims asserted by members of their own household. Likewise, no coverage is provided for claims arising from the use of private or commercial aircraft, automobiles or other motor vehicles, or water craft which transport people as operators or passengers in conjunction with club, chapter or sanctioned event activities.

Site Owner Coverage includes:

- ❖ Premises liability for injury to spectators at a flying event.
- ❖ Liability for injury or damage off-site (i.e., a model that strays from the site and injures someone on adjoining property).
- ❖ Legal cost for defense of a lawsuit naming the site owner.
- ❖ Contractual Liability coverage for contracts between the club and site owner holding the site owner harmless for claims or suits involving injury or damage caused by the club's activities.
- ❖ AMA insurance is primary.
- ❖ Separation of insured protects site owners from member or club acts voiding coverage.

Specifically Note:

Claim reporting: any incident or claim must be reported immediately to AMA Headquarters, (765) 287-1256, or email claims@modelaircraft.org.

¹ Choose "AMA Documents" from the menu then select "Safety and Member Benefits" from the contents section. The liability policies are Documents 500-L and 500-LA.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/22/2024

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 have **ADDITIONAL INSURED** provisions or 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).

PRODUCER FNIC P.O. Box 45279 Omaha NE 68145	CONTACT NAME: PHONE (A/C, No, Ext): 402-861-7000 FAX (A/C, No): E-MAIL ADDRESS:														
INSURED Academy of Model Aeronautics, Inc. &/or Affiliated &/or Associated Chartered Clubs, Chapters & Members Thereof 5161 E. Memorial Drive Muncie IN 47302	<table><tr><th>INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A: Illinois Union Insurance Company</td><td>27960</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: Illinois Union Insurance Company	27960	INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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COVERAGES**CERTIFICATE NUMBER:** 683060168**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, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	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 <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			G22011534019	3/31/2024	3/31/2025	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 0 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y / N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N / A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Excess Liability			G22011546019	3/31/2024	3/31/2025	Limits per Occ \$1,500,000 General Aggregate \$4,000,000

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

Dare County Government is an additional insured, primary and non-contributing as respects to any additional insured site owner. Location: Dare County Construction and Demolition Landfill. Club: 2691 Dare County RC Flyers

CERTIFICATE HOLDER**CANCELLATION**

Dare County Government
PO Box 1000
Manteo NC 27954

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

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