

**Youth Sanctioned Tournament**

**Supplemental Insurance Form**

(Effective Aug 1, 2022)

**IOA INSURANCE SERVICES**

Supplemental tournament insurance is offered to hosts of US Club Soccer-sanctioned tournaments in order to obtain liability and accident insurance coverage for all non-US Club Soccer participating teams. (Teams using US Club Soccer passcards already have insurance coverage.) This simplifies attendance for teams, especially if a number of non-US Club Soccer teams are unable to obtain insurance from their state association or other

U.S. Soccer Federation member organization. This form is to be completed by the tournament host, and coverage is valid only for the US Club Soccer-sanctioned tournament identified below.

**Please submit the following information:**

1.

2.

This completed and signed **Sanctioned Tournament Supplemental Insurance Form**

**Premium Payment Options – Check or Credit Card –** If mailing your application, make a check payable to “ Insurance Office of America, Inc. “ ( for the appropriate premium listed in the “Category” section). If you are e-mailing your submission an IOA invoice for payment will be e-mailed back to you with options to pay by either check or credit card. Please note certificates of insurance will not be issued until premium payment

has been received in the IOA office.

A copy of the **approved US Club Soccer Tournament Hosting Application**

3.

**Submission:**

* Via email to: [**John.Burkart@ioausa.com**](mailto:John.Burkart@ioausa.com) or [**JD.Wallum@ioausa.com**](mailto:JD.Wallum@ioausa.com)(or)
* Via postal mail to: John Burkart / IOA Insurance Services / 130 Vantis, Suite 250 / Aliso Viejo, CA 92656

For more information, please contact IOA’s JD Wallum at (719) 651-5582.

Insurance products provided by Insurance Office of America, Inc. (IOA), CA License # 0E67768

**DETAILS:**

**CATEGORY:**

**Please apply a check mark to one of the following:**

1 to 50 non-US Club Soccer teams attending (Premium = $847)

51 to 100 non-US Club Soccer teams attending (Premium = $1,210) 101+ non-US Club Soccer teams attending (Premium = $1,815)

*I certify that the information on this Sanctioned Tournament Supplemental Insurance Form is accurate to the best of my knowledge. I understand that anyone who knowingly falsifies this information is subject to suspension from US Club Soccer and the U.S. Soccer Federation.*

**Signature –Authorized Tournament Director: Printed Name –Authorized Tournament Director:**

**Date**

US Club Soccer-sanctioned tournament:

Host club/organization:

Tournament location:

Tournament date(s):

Contact name:

Contact phone:

Contact email address:

Contact street address:

Contact city/state/zip code:

**INSTRUCTIONS:**

**OVERVIEW:**

**ACCIDENTAL MEDICAL INSURANCE:**

*Underwritten by the United States Fire Insurance Company, rated “A, XII” by A.M. Best.*

**Accidental Medical Expense Benefits**

Full Excess plan with claims paid at 80% URC - Usual, Reasonable and Customary charges

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Accidental Medical Maximum Per Injury Chiropractic/Physical Therapy Maximum Durable Medical Equipment Maximum Prescription Drugs Maximum

Deductible Benefit Period

First Treatment

$200,000

$1,000

$1,000

$1,000

$500

52 weeks from the date of injury Within 90 days of injury

***This is a Summary of Benefits only.***

***See the Policy for all coverage terms, including benefits, benefits***

***sub-limits, coverage conditions and exclusions.***

Coverage is written on a master policy held by US Club Soccer and Accident Medical Expense Benefits are paid on a Full Excess basis with covered benefits paid at 80% URC. Benefits provided by this policy are paid only after the claim has been adjusted and paid by primary insurance. Primary insurance is any in force healthcare plan or applicable insurance plan (for example, group medical plan or other parent’s personal medical plan). Claims must be submitted to primary insurance first, and then sent to A-G Administrators, Inc. as instructed on the Accident Medical Claim Form. If claimant is not covered by a primary insurance plan, this policy pays claims on a primary basis. All accident claims are evaluated, adjusted and paid directly by A-G Administrators, Inc.

**LIABILITY INSURANCE:**

*Underwritten by Accredited Surety and Casualty Company: rated “A-, X (Superior)” by A.M. Best. Coverage is written on a master policy held by US Club Soccer.*

**Limits:**

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Per Occurrence Limit:

Aggregate Limit:

Products and Completed Operations: Personal and Advertising Injury:

Sexual Abuse/Molestation Liability Aggregate: Damage to Premises Rented:

Medical Payments (Spectators Only):

Participant Legal Liability Deductible

$2,000,000

$4,000,000 Per Sanctioned Event

$2,000,000

$2,000,000

$2,000,000

$2,000,000

$5,000

Included

$0

**Notable Exclusions:**

Standard CGL exclusions; alcohol and drug-related claims; trampolines and springboards; employment-related practices and punitive damages. See policy for actual coverage, conditions and exclusions.

IOA-USCS-Youth-STSIF-RSI-SIS-8-2022