

PRODUCER

FOR SERVICE CALL:
FRANCIS L. DEAN & ASSOCIATES, INC.
 1776 S. NAPERVILLE RD., BLDG. B
 P.O. BOX 4200
 WHEATON, IL 60189
 (800) 745-2409
 www.fdean.com

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.

COMPANIES AFFORDING COVERAGE

COMPANY A STARR INDEMNITY & LIABILITY COMPANY

INSURED SPORTS AND RECREATION PROVIDERS ASSOCIATION (PURCHASING GROUP) AND ITS PARTICIPATING MEMBERS:

Music City Mystique
 616 Russell Street
 Nashville, TN 37206 CERT. #P2GL-107609-02

COMPANY B

COMPANY C

COMPANY D

COVERAGES

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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	P2GL-100000-02	1/1/2010	1/1/2011	GENERAL AGGREGATE	\$ 2,000,000.00
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG	\$ 2,000,000.00
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY	\$ 1,000,000.00
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE	\$ 1,000,000.00
	<input checked="" type="checkbox"/> INCLUDES ATHLETIC PARTICIPANTS				FIRE DAMAGE (Any one fire)	\$ 300,000.00
					MED EXP (Any one person)	\$ 5,000.00
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	\$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE	\$
	GARAGE LIABILITY				AUTO ONLY-EA ACCIDENT	\$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY:	
					EACH ACCIDENT	\$
					AGGREGATE	\$
	EXCESS LIABILITY				EACH OCCURRENCE	\$
	<input type="checkbox"/> UMBRELLA FORM				AGGREGATE	\$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM					\$
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTHER
	THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL				EL EACH ACCIDENT	\$
					EL DISEASE - POLICY LIMIT	\$
					EL DISEASE - EA EMPLOYEE	\$
	OTHER					
	Total Certificate Premium:					\$300.00

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

Winter Guard Activities

CERTIFICATE HOLDER

Music City Mystique
 616 Russell Street
 Nashville, TN 37206

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL **30** DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Francis L. Dean

ADDITIONAL INSURED

Date (MM/DD/YY)
12/5/2009

AGENCY	PHONE (A/C, No, Ext): 800-745-2409 FAX (A/C, No.): 630-665-7294	APPLICANT (First Named Insured)	Phone (A/C, No, Ext):
FRANCIS L. DEAN & ASSOCIATES, INC. 1776 S. NAPERVILLE RD., BLDG. B P.O. BOX 4200 WHEATON, IL 60187		Music City Mystique 616 Russell Street Nashville, TN 37206	
EFFECTIVE DATE 1/1/2010		EXPIRATION DATE 1/1/2011	
CO/PLAN		POLICY NUMBER: P2GL-100000-02	
ACCOUNT NUMBER:			
CODE:		SUBCODE:	
AGENCY CUSTOMER ID			

INTEREST	RANK:	NAME AND ADDRESS	REFERENCE #:	CERTIFICATE REQUIRED	INTEREST IN ITEM NUMBER
<input checked="" type="checkbox"/>	ADDITIONAL INSURED	WGI 2405 Crosspointe Drive Dayton, OH 45342			LOCATION: BUILDING: VEHICLE: BOAT: SCHEDULED ITEM NUMBER: OTHER
<input type="checkbox"/>	LOSS PAYEE				
<input type="checkbox"/>	MORTGAGE				
<input type="checkbox"/>	LIENHOLDER				
<input type="checkbox"/>	EMPLOYEE AS LESSOR				
ITEM DESCRIPTION:					
<input checked="" type="checkbox"/>	ADDITIONAL INSURED	Hillwood High School 400 Davidson Road Nashville, TN 37205			LOCATION: BUILDING: VEHICLE: BOAT: SCHEDULED ITEM NUMBER: OTHER
<input type="checkbox"/>	LOSS PAYEE				
<input type="checkbox"/>	MORTGAGE				
<input type="checkbox"/>	LIENHOLDER				
<input type="checkbox"/>	EMPLOYEE AS LESSOR				
ITEM DESCRIPTION:					
<input checked="" type="checkbox"/>	ADDITIONAL INSURED	Freedom Middle School 750 New Highway 96 West Franklin, TN 37064			LOCATION: BUILDING: VEHICLE: BOAT: SCHEDULED ITEM NUMBER: OTHER
<input type="checkbox"/>	LOSS PAYEE				
<input type="checkbox"/>	MORTGAGE				
<input type="checkbox"/>	LIENHOLDER				
<input type="checkbox"/>	EMPLOYEE AS LESSOR				
ITEM DESCRIPTION:					
<input checked="" type="checkbox"/>	ADDITIONAL INSURED				LOCATION: BUILDING: VEHICLE: BOAT: SCHEDULED ITEM NUMBER: OTHER
<input type="checkbox"/>	LOSS PAYEE				
<input type="checkbox"/>	MORTGAGE				
<input type="checkbox"/>	LIENHOLDER				
<input type="checkbox"/>	EMPLOYEE AS LESSOR				
ITEM DESCRIPTION:					
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ITEM DESCRIPTION:					