

### **EVENT PERMIT**



Ordinance 14-15

#### HORNETS YOUTH SPORTS

**PERMIT NUMBER:** 

TMP2017-00235

Date(s) of Event:

August 28, 2017 thru December 31, 2017 7:00AM-11:00PM

Property Owner:

LEE COUNTY

Applicant:

HORNETS YOUTH SPORTS

Contact: KELLY WILLIAMS

Description:

Youth Football and Cheer

Location of event:

6500 SOUTH POINTE BLVD FORT MYERS 33919

RUTENBERG PARK\*\*\*239-314-8552

Will the event be attended by 1000 or more people?

No

Will the event be held on County Owned Property?

Yes

Will there be alcohol consumed or sold at the event?

No

Will a bond be posted for this event?

No

#### Permit Conditions:

- \* Applicant must meet all event application requirements, including requirements of the sign-off agencies.
- \* The premises is to be left in the same condition as it was prior to the event.
- \* The permit is to be readily available for inspection during the entire event.
- \* If this approval includes the sale or consumption of alcoholic beverages, no alcoholic beverages may be consumed 1 1/2 hours prior to the conclusion of the event and vacating the facility/property.

Board of County Commissioners

Lee County, Florida

County Manager

Date



## **Event Application**

**Special Event** 

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography



#### **Event Application**

Check the appropriate box(es) below:

The state of the s
SPECIAL EVENT PERMIT
USE OF COUNTY PROPERTY PERMIT
PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT

Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	Harnets Youth sports - Youth Football /Cheer
Date(s) of Event / Production:	Agust 28, 2017 - December 31, 2017
Location(s) of Event:	6500 South Ponte Blud,
Name of Applicant:	Hartiers York Sports - Kelly Williams (President)
Applicant Address:	9181 Lake Jan Carlos Circle Fort Myers, FC 33967
Applicant Phone Number:	239-314-8552
Contact Person: (If different from applicant)	Kelly williams
Contact Phone Number: (If different from applicant)	239-314-8552
Email Address:	Capelul 20 egmail com
Estimated Attendance:	1000/ weekend
Event Description: Include each activity, when activities take place, etc.	Youth Football Home Gener
Hours of Operation:	7am to 11 pm
STRAP # of Parcel:	
Owner of Premises*:	

<sup>\*</sup>Notarized statement from the property owner specifically consenting to the proposed use required.



#### Fill out the following questions for all permit types:

What is the Zoning Classification of the premises? Community Par	<u>v</u>
	Туре:
Do you have the appropriate permits for the temporary structures?	⊤Yes
<ul> <li>For a 'Special Event' and 'Use of County Property' permit, submit a site plan wit indentified, including all parking areas.</li> </ul>	th all proposed facilities and activities
Insurance Company Insuring the Event: ESE Insurance Broken	ae uc (AIG)
Note: Certificate of Insurance must be submitted at time of application	<i>a</i>
Surety Company Bonding this Event (Name and Address):	
Will Vehicles be Used as Part of This Will Food be Available at this Event?  Event?	Will Alcoholic Beverages be served/consumed at this Event?
Yes No	Yes No
If yes, automobile coverage must be included on the certificate of insurance.  If yes, products liability coverage must be included on the certificate of insurance.	If yes, liquor liability coverage must be included on the certificate of insurance.
	TOO SOUTH POINT BLOW 3399
Type of Food being Served: Hamburgers Hot Doss ( P. 72)	a - beura ces
Section II - USE OF COUNTY PROPERTY PERMIT	
Organization Sponsoring the Event:	
Fill out this portion for applications for Solicitation in the County Rights-of-Way	<i>:</i> :
Name of Charity:	
Address of Charity:	1
Phone Number:	
Non-profit certificate/registration number:	
(Proof of registration with the Dept. of Agriculture & Consumer Services \$496.405 or proof the organization	is exempt from this requirement. §316.2045)
Section III - SALE/CONSUMPTION OF ALCHOLIC BEVERAGES P	ERMIT
Is alcohol being sold/consumed on County Property?  If Yes, then a "Lee County Alcohol Permit" is required. Only non-profit organizations can sell alcohol on County	Yes No
Non-profit certificate/registration number: (Required if alcohol is to be <u>SOLD</u> at the event)	
Please note: A permit from the State of Florida Division of Alcohollc Beverages and Tobacco may further details	also be required; please call (239) 344-0885 for



#### Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

		TV Comme	, .	Still Photos	
Public Service Announcement	t 🗍 Industrial / Documentary	Other:	2/A		
I any of the following be need	ed or included*?				
Street Closure		☐ Yes	√ No		·
Traffic / Crowd Cor	ntrol	Yes	√ No	•	
Fire or Burning	· · · · · · · · · · · · · · · · · · ·	T Yes	X No		
Explosives or Pyrot	echnics	Yes	√ No		
Animals, Large or S	mall	Yes	√ No		
Construction of An	y Kind	Yes	⊠ No		
Large and/or Nume	erous Vehicles	Yes	₹ No		
Helicopters, Boats,	etc.	Yes	₹ No		
Stunts		☐ Yes	Ŋ No		
Other		Yes	No No		
- None Weed					
pecial Parking Requirements:	ed: (Personnel, equipment, facilitie	es, etc.)			
pecial Parking Requirements:  City or County Services Require  The following information is re the industry. If exact figures a	ed: (Personnel, equipment, facilitie quired for local and state records o re not available, please estimate as	on production in closely as possil	ole.		ic impac
pecial Parking Requirements:  City or County Services Require  The following information is re	ed: (Personnel, equipment, facilitie quired for local and state records o	on production in closely as possil	Florida to tra ole. nber of locals		ic impac
pecial Parking Requirements:  City or County Services Require  The following information is re the industry. If exact figures a	ed: (Personnel, equipment, facilitie quired for local and state records o re not available, please estimate as	on production in closely as possil Nur	ole.		ic impac

#### **Applicant Agreement - Signature Required**



#### **SECTION 1 - SAFETY**

The Applicant agrees to provide adequate traffic and crowd control, emergency medical services and any other items, at the Applicant's expense, required by Lee County to protect the health, safety and welfare of the public. Lee County shall have the power to review the proposal and require, as necessary, detailed plans, diagrams, and explanations to clearly outline to Lee County, exactly what the Applicant is proposing.

#### **SECTION II - INSURANCE**

The Applicant, at its sole expense, agrees to procure and maintain in force during the entire term of the application, liability insurance in the amounts determined by Lee County Risk Management to protect against damages or other claims arising from use of County property by the applicant or its guests. Other limits may also be established by Lee County Risk Management for events which will be serving or consuming alcoholic beverages at approved County property. The insurance policy must also include coverage for Applicant's contingent liability on damages, claims or losses. "Lee County Board of County Commissioners" must be named as "additional insured" on the Certificate of Insurance, and the Certificate must be delivered to Lee County prior to Applicant's use of the property. The Insurance may not be canceled during the term of the event, if this occurs, the County has the right to revoke approvals related to use of the County property for the event, without recourse by the applicant.

#### SECTION III - INDEMNIFICATION

The Applicant agrees to indemnify, release and save harmless Lee County against any and all claims, costs, demands, damages, judgments or injuries of any nature arising from the conduct or management of, or from any work or thing whatsoever done in or about said Lee County property or any building or structure appurtenant thereto or equipment thereof during the term of this Permit, or arising during such term from any act of negligence of the Applicant, Applicant's agents, contractors, or employees, or arising from any accident, injury, or damage whatsoever, however caused, to any person or persons, or to any property of any person, persons, corporation or corporations, occurring during the term of this agreement on, in, or about said Lee County property, and from and against all costs, attorney's fees, expenses and liabilities occurring in connection with any such claim or any action or proceeding brought thereon.

For film permit applicants: The permittee shall have on-site a responsible representative empowered with authority over the filming director, filming crews, participants and filming operation. Permittee shall indemnify, defend and hold harmless the county, its officers, agents and employees from and against all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising out of or occurring during the activities of the permittee, and resulting or occurring from any negligent act, omission or error of permittee, resulting in or relating to injuries to body, life, limb or property sustained in, about or upon the permitted permises or improvement thereto, or arising from the use of the premises.

#### SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES

The Applicant agrees to accept the County property on possession as being in a satisfactory state of repair and in sanitary condition.

The Applicant must surrender the premises to Lee County in the same condition as when Applicant takes possession, allowing for reasonable use and wear, and damage by acts of God. Applicant agrees to remove all business signs or symbols placed on the premises by the Applicant before redelivery of the premises to Lee County, and restore the premises to the condition in which it existed before their placement. Any signs and markings created or used in connection with this event must be temporary and removable; painting roadways, trees or any other fixed object is strictly prohibited. Applicant agrees to clear the Lee County property of litter at the close of the event.

#### **Applicant Agreement - Signature Required**



#### SECTION V - AGREEMENT

The Applicant agrees that Lee County can, at its sole discretion, terminate and cancel its permit to use Lee County property at any time without prejudice. Applicant further agrees to waive, release, save and hold harmless Lee County from any and all claims, demands or cause of actions based upon Lee County's cancellation or termination of said permit.

The Applicant agrees that the Lee County permit does not provide Applicant with any property rights in the County property in question or in the permit itself.

The applicant does acknowledge and hereby affirms that any and all information is accurate to the best of his/her knowledge.

Concern Williams	Prenduct Williams	Print Name of Applicant and Title
Concern Williams	Print Name of Witness	
Concern Williams	Print Name of Witness	
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### State of Florida County of Lee

#### Extra Duty Detail Request Form

Please fill out the Extra Duty Request form attached to this document completely. All details are a minimum of four (4) hours with the exception of boat details which are a minimum of six (6) hours and a half hour drive time to and from the detail location. When five (5) or more deputies are assigned to an event, a supervisor with the rank of Sergeant or above will be assigned at an upgraded hourly charge. Depending on the type of event or crowd size, it will be at the discretion of the Sheriff's Office to determine the number of deputies needed.

The current detail rat	es are:		
Security	\$40/hr	Traffic	\$50/hr
Funeral Escort	\$40/hr	Security Supervisor	\$50/hr
Escort	\$40/hr	Traffic Supervisor	\$60/hr
Boat	\$40/hr	Civil Stand-by	\$60/hr
Holiday/Last Minute	\$60/hr	Prisoner Transport	\$60/hr

Details are charged a \$15 <u>per deputy</u> vehicle rate. All boat details are charged a \$20 per hour boat rate.

Extra Duty Details will not be provided to any person, firm or organization whose members, business or operations are of questionable nature; or for any event that will discredit the assigned Deputy, Sheriff's Office or County. The Sheriff's Office reserves the right to cancel the detail without notice and to recall the deputy(s) when necessary for community safety.

The Lee County Sheriff's Office will be the only armed personnel at any event where the detail is taking place. Any private security company that is hired to work alongside the Sheriff's Office will be a reputable, licensed and insured company whose employees are State D licensed <u>unarmed</u> security guards. Proof of the signed contract with private security company will be required.

In order to cancel a detail, notice must be given to the Detail Coordinator twenty-four (24) hours prior to the start of the detail either by phone or email. If the cancellation is less than twenty-four (24) hours, a four (4) hour charge per deputy will be billed. In the case of weather, notice of cancellation must be received within two (2) hours of the starting time otherwise a two (2) hour charge per deputy will be billed. In the event of a cancellation after business hours, please call 239-477-1000 and ask to have the on-call Detail Coordinator call you.

Unless otherwise specified, full payment of all details must be received one (1) week prior to the start of the event in the form of a cashier's check, money order, business check or cash. The Lee County Sheriff's Office does not accept credit cards or personal checks. Payments can be sent to: The Lee County Sheriff's Office 14750 Six Mile Cypress Pkwy., Fort Myers, FL 33912 ATTN: Details Unit.

	LEE COUNTY SHERIFF'S	OFFICE USE ONLY	
Total Deputy(s) 2 each	Total Hours 12 each	Rate per Hour	Vehicle Rate <u>waived</u>
Total Cost for Detail	/week		
Vender Signature	Dat	e	



14750 Six Mile Cypress Parkway • Fort Myers, Florida 33912-4406 • (239) 477-1000

LCSO Details Main Phone Number: 239-477-1199							
Vendor	Vendor Information						
Business Name: Cypress Lake Hornets	3						
Street: 6500 South Pointe Blvd	•						
	State: FL Zip Code: 33919						
Business Contact: Kelly Williams	Phone: 239-314-8552						
Email Address: capekel2.0@gmail.con							
Eman Address.							
Event	Information						
Detail Location: Ruttenberg Park							
Street: 6500 South Pointe Blvd							
City: Fort Myers	State: FL Zip Code: 33191						
Contact During Event: Kelly Williams	Phone: 239-314-8552						
Event Date: 9/9/17, 9/23/17,10/7/17,10/28/17							
Anticipated Crowd Size : 1000 weekend	Type of Event: pop warner football games						
1							
Additional Security Working Detail: Yes							
Permits Attached: Yes No	Alcohol Served: Yes VNo						
Detail I	Information						
Security Traffic	Prisoner Transport						
Escort Holiday	Funeral Escort						
Last Minute Stand-by							
Marked Vehicle Yes No	Unmarked Vehicle Yes No						
Uniformed Deputy Yes No	Plain Clothes Deputy Yes No						
estimate does not include deputies being held over, reason and the deputies are held over, the league very Payment is due one week prior to each game.	games. Deputies will patrol parking lot and field. Price  Should there be a game delay due to weather or any other will be responsible for paying the overage as soon as possible.  CELLATION DUE TO WEATHER OTHERWISE FULL						





#### LEE COUNTY SHERIFF'S DEPARTMENT 14750 SIX MILE CYPRESS PARKWAY FORT MYERS,FLORIDA33912 (239) 477-1199

Check the appropri	ate box(es) be	low:
SPECIAL EV	ENT PERMIT	
∇ USE OF CO	UNTY PROPERTY	PERMIT
F PERMIT TO	SELL AND CONS	UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	IIT .	
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Parking:		ndled by event staff. If a large crowd is anticipated, additional deputies shouk in and limit any parking issues.
Deputies (How Many?):	two deputies ** have been filled not include playe	0 two deputies ** 9/23/17 1500-2100 two deputies ** 10/07/17 1500-2100 10/28/17 1500-2100 two deputies. This permit and the detail request form out according to the schedule that was turned over by the league and does off games. Any additional games that are added need to be called in or see County Sheriff's Office Details Unit.
Fee for Services:		r minimum oer deputy on all details. Security details are \$40/hr per deputy. or a supervisor, should one be deemed necessary is \$50/hr.
Special Arrangements:	game. If the deta cancellation of the The league is re	seed to be paid for in advance no less than one week prior to the start of each ails are not paid in advance, Lee County Parks & Rec will be notified and ne event may be the result. LCSO is not responsible for seeking out payment sponsible for confirming game dates and times prior to the start of the event recoverage. Anything over the 4 hour mimimum security rate will be billed out curity rate.
	Print Name:	Captain J. Loethen
	Signature:	Capt Joston 92149
	Title:	Special Events, Permits and Details
	Date:	8-29-17



#### FIRE DEPARTMENT

The Fire Department serving the area where the event is to be held signs this form.

Please see User's Guide for contact information and Fire District Map.

		ate b						

SPECIAL EVENT PERMIT

USE OF COUNTY PROPERTY PERMIT

FILM PERMIT

AFTER REVIEWING THE APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WILL REQUIRE THE APPLICANT TO COMPLY WITH FOR THEIR EVENT.

Fire Guards (How Many?)	NA
Fee for Services:	MA
Flammable Vegetation:	M
First Aid Equipment:	M
Fire Extinguishing:	WA
Special Arrangements:	As per Lee Country School Board policies
	Print Name: 18th Comer
	Signature: All Com
	Title: Deputy Chief
	Date: 0/3///7
	Page 17



#### EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY 14752 SIX MILE CYPRESS PARKWAY FORT MYERS, FL 33912 (239) 533-3911

Check the appropri	ate box(es) belo	w:		
☐ SPECIAL EV ☑ USE OF CO ☐ FILM PERM	UNTY PROPERTY P	ERMIT	. ·	
AFTER REVIEWING THE WILL REQUIRE THE APPL			WHAT ARRANGEMENTS Y T.	OUR ORGANIZATION
Treatment Facilities:	None necessary.			
Medical Personnel:	None necessary.			
Medical Supplies / Equipment:	None necessary.			
Safety Requirements:	No additional precau			
Fee for Services	Not applicable.			-
Special Arrangements:	Please call 911 in the 239 533-3911.	e event of an emergency. To	o arrange special event coverage	, contact our office at
	Print Name:	Benjamin Abes		
	Signature:	Benjamin Abes	Digitally signed by Benjamin Abes Date: 2017.08.30 07:47:10 -04'00'	
	Title:	Chief		
	Date:	08/30/2017		



#### DEPARTMENT OF TRANSPORTATION 1500 MONROE STREET FORT MYERS,FL33901 (239) 533-8580

Check the appropri	ate box(es) be	low:	
SPECIAL EV	ENT PERMIT		
区 USE OF CO	UNTY PROPERTY	PERMIT	
•		SUME ALCOHOLIC BEVERAGES WITHIN LEE COUN	TY FACILITIES
☐ FILM PERM	11T	•	
		PLEASE INDICATE BELOW WHAT ARRANGEMENTPLY WITH FOR THEIR EVENT.	rs your organization
Parking:	No event parking o	on Lee County maintained road rights-of-way.	
Ingress and Egress:	Use all established	means of ingress and egress.	
Special Arrangements:	Use Lee County Sh	neriff's Office for assistance with traffic control as needed.	
	-		
	Print Name:	Bryan Miller	
	Signature:	Bryan D. Miller  Digitally signed by Bryan D. Miller Date: 2017.08.29 09:21:33 -04'00'	<del>-</del> 
	Title:	Senior Project Manager	<del></del>
	Date:	August 29, 2017	<u> </u>



#### LEE COUNTY PARKS AND RECREATION 3410 PALM BEACH BOULEVARD FORT MYERS,FLORIDA33916 (239) 533-7275

Check the appropria	rte box(es) belo	ow:					
SPECIAL EV	ENT PERMIT						•
☑ USE OF CO	UNTY PROPERTY	PERMIT					
☐ PERMIT TO	SELL AND CONSU	JME ALCOHOLI	C BEVERAGES \	WITHIN LEE (	COUNTY FAC	ILITIES	
ifilm Perm	IT						
AFTER REVIEWING THE WILL REQUIRE THE APPL				AT ARRANGE	MENTS YOU	r organiza	TION
llumination:	Must follow all loca	l codes and ordin	ances to shut ball	field lights off	by designated	time.	The second secon
			JMANUAL TO THE PARTY OF THE PAR				
Parking Areas:	Event organizer mu and egresses rema	ist develop a parl in open and clear	oing plan with par for emergency ve	king attendant hicles.	s to ensure all	emergency acco	255
Special Arrangements:	Even organizer mu officials and fans. I building codes, Pau	ollow established	d guidelines set by	the Lee Coun	ty Sheriff's offic	e. Must follow	all
						. •	
	Print Name:	Alise Flanjack	armi's a		facilitation 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		٠
	Signature:	Alse	Hozak				
	Title:	Deputy Director	r <i>Q</i>				
	Date:	8/31	/17				
Cypress lake	a		-		,		
Cypress lake Homets Foo	tbill	P	age  10			the ability of the second of t	



# LEE COUNTY RISK MANAGEMENT COUNTY ADMINISTRATION BUILDING - 4<sup>TH</sup> FLOOR 2115 SECOND STREET FORT MYERS,FLORIDA33901 (239) 533-2221

Check the appropriat	te box(es) bel	law:	
SPECIAL EVE      USE OF COU      PERMIT TO S	NTY PROPERTY	PERMIT  UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FAC	ILITIES
☐ FILM PERMI	Γ		
		PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOU PLY WITH FOR THEIR EVENT.	JR ORGANIZATION
nsurance Requirements:	occurrence to pr	eral liability insurance with minimum limits of One Million Dollar otect against bodily injury and/or property damage relative to a event within Lee County.	
	44 11 11 11 11 11 11 11 11 11 11 11 11 1		
Special Arrangements:	A Certificate of Ir Board of County additional insure	nsurance shall be submitted as evidence of the required coverage Commissioners, P.O. Box 398, Fort Myers, FL 33902 as the certificed.	e listing Lee County ate holder and as an
	Subject to proof	of insurance.	
	Print Name:	Mike Figueroa	
	Signature:	7	· ·
	Title:	Risk Program Manager	
	Date:	August 29, 2017	

Client#: 52292

HORNYOUT

CERTIFICATE OF LIABILITY INSURANCE ACORD.

DATE (MM/DD/YYYY) 7/12/2017

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(les) must 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 PHONE (A/C, No, Ext): E-MAIL ESP INSURANCE BROKERAGE LLC 306 Main Street ADDRESS: Worcester, MA 01608 NAIC # INSURER(S) AFFORDING COVERAGE INSURER A: Houston Casualty Company INSURER B : AIG Insurance 19380 INSURED HORNETS YOUTH SPORTS INSURER C: Great American Ins Co. (IL) 6500 SOUTH POINT BLVD INSURER D : Fort Myers, FL 33919 INSURER E INSURER F REVISION NUMBER: CERTIFICATE NUMBER: 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. POLICY EFF POLICY EXP (MM/DD/YYYY) (MM/DD/YYYY ADDL SUBR TYPE OF INSURANCE POLICY NUMBER s1,000,000 X COMMERCIAL GENERAL LIABILITY 177003962 07/01/2017 07/01/2018 EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 CLAIMS-MADE X OCCUR MED EXP (Any one person) \$1,000,000 PERSONAL & ADV INJURY \$1,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE \$1,000,000 PRODUCTS - COMPIOP AGG POLICY OTHER: COMBINED SINGLE LIMIT (Ea accident) AUTOMOBILE LIABILITY BODILY INJURY (Per person) ANY AUTO ALL OWNED SCHEDULED BODILY INJURY (Per accident) AUTOS NON-OWNED AUTOS PROPERTY DAMAGE (Per accident) HIRED AUTOS EACH OCCURRENCE UMBRELLA LIAB OCCUR AGGREGATE EXCESS LIAB CLAIMS-MADE DED RETENTION \$ WORKERS COMPENSATION STATUTE AND EMPLOYERS' LIABILITY E.L. EACH ACCIDENT ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) THE CERTIFICATE HOLDER is added as an additional insured with respects to general liability coverage but only with respect to liability arising out of the operations of the named insureds league; Sexual Abuse / Molestation limits are as follows: \$1,000,000 EACH OCCURRENCE / \$1,000,000 AGGREGATE THIS POLICY DOES NOT EXCLUDE CONCUSSIONS

SRG0009133720

EPPE191492

(See Attached	Descriptions)
---------------	---------------

**CERTIFICATE HOLDER** 

(Mandatory in NH)

A&H

D&O

If yes, describe under DESCRIPTION OF OPERATIONS below

ON UP 08/20/17

07/01/2017 07/01/2018

07/01/2017 07/01/2018 SEE REMARKS

LEE COUNTY BOARD OF COUNTY COMMISSIONER	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
P.O. BOX 398 Fort Myers, FL 33902	AUTHORIZED REPRESENTATIVE
	Por U / U

CANCELLATION

© 1988-2014 ACORD CORPORATION. All rights reserved.

E.L. DISEASE - EA EMPLOYEE \$

E.L. DISEASE - POLICY LIMIT \$

SEE REMARKS

#### DESCRIPTIONS (Continued from Page 1)

Accidental Death, Accidental Dismemberment (AD&D) Benefit:

\$15,000 Maximum amount

incurral Period: 365 days Aggregate Limit \$50,000

Accident Medical Expense Benefit:

\$1,000,000

Deductible:

per accident

\$250

Dental Maximum:

\$250 per

tooth/per accident

Incurral Period 30 days after date of injury

Benefit Payout Period: payable only for such charges incurred within 52 weeks after the date of the

accident causing the injury

**DIRECTORS & OFFICERS** 

**Directors & Officers Limit** 

\$1,000,000

Retention

Aggregate Limit

\$1,000,000

CRIME PROTECTION POLICY NUMBER 177003962 COMPANY: HCC

Crime / Employee Theft

\$10,000

n in de la company de la c

Deductible

\$500



#### LEE COUNTY VISITOR & CONVENTION BUREAU 2201 SECOND STREET, SUITE 600 FORT MYERS, FLORIDA 33901 (239) 338-3500

Check the appropri	ite box(es) below:
FILM PERM	IT ONLY
AFTER REVIEWING THE . WILL REQUIRE THE APPLI	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION CANT TO COMPLY WITH FOR THEIR EVENT.
Special Arrangements:	Special event permit with city. This is not a film Permit.
	This is not a time rained.
	J.R.
Other:	
ourier.	
•	
	Print Name: Jackie Rodriauez
	Signature:
	Title: Administrative Specialist
	Date: 8/31/17

# American Pouth Fooball and Cheer

Upon the recommendation of the board of advisors, presents to and recognizes

### Cypress Lake Hornets

as a Chartered Member

5 Tackle Teams
3 Cheer Squads

for the 2016 Season

With all the rights honors and privileges thereunius appertaining. In witness whereof the seal of American Youth Football and the signatures of the Commissiononer and President of American Youth Football are herunto affixed.

James Taft Chairman Emeritus



Joseph J. Galat President

# American Pouth Fooball and Cheer

Recognizes the Outstanding Service Of

Kelly Williams (Conference Contact)

Kelly Williams (President)

Amp Muenscher (Treasurer)

Lisa Martin (Cheer Director)

Adrienne Williams (Board Member)

Mike Hobbs (Volunteer)

Dave Rockwell(Volunteer)

And commends you for your service.

Please attach the charter certificate, the officer commendation and this form to your organizations by-Laws. The following information is to be used by authorized league representatives.

#### **州巴州邓巴**亚:12857

This charter number must be used when applying with American Youth Football grants. All administrative changes must be recorded with American Youth Football. Please login to www.myayf.com Association Administrator