

# **EVENT PERMIT**



Ordinance 17-08

# Youth Football & Cheer League for Florida Elite/Fellowship Lions

**PERMIT NUMBER:** 

TMP2024-00292

Date(s) of Event:

September 28, 2024 through December 31, 2024.

Monday-Friday: 5:00PM-9:00PM.

Saturday's: 6:00AM-10:00AM.

Property Owner:

**UNKNOWN** 

Applicant:

Sabrina Woods

239-895-8266

Description:

Youth Football and Cheer League for Florida Elite/Fellowship Lions playoff games to be

held on September 8, 2024 through December 31, 2024. Monday through Friday

5:00PM-9:00PM. Saturday's 6:00AM-10:00AM.

Location of event:

20 - 50 SOUTH RD, FORT MYERS, FL 33907

Jerry Brook Park

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

Jate

ftmpprmt\_specialevent.rpt



# **Event Application**

**Special Event** 

Use of County **Property** 

Alcohol within Lee County **Facilities** 

Film, Video Photography

In12024-002



# **Event Application**

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT	
USE OF COUNTY PROPERTY PERMIT	
PERMIT TO SELL AND CONSUME ALCHOLIC	BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMIT	

Section I - GENERAL INFO	ORMATION (All Permit Types)				
Fitle of Event / Name of Production	Youth Football and Cheer League for Florida Elite/Fellowship Lions				
Date(s) of Event / — Production:	January 1, 2024 - December 31, 2024 Sept 29, 2tQリ				
Location(s) of Event:	Jerry Brooks Community Park 50 South Rd, Fort Myers, FL 33907				
Name of Applicant:	The Greater Fort Myers Junior Football Association				
Applicant Address:	PO Box 61101 Fort Myers, FL 33906				
Applicant Phone Number:	239-895-8266				
Contact Person: (If different from applicant)	Sabrina Woods				
Contact Phone Number: (If different from applicant)	239-895-8266				
Email Address:	swoods111684@gmail.com				
Estimated Attendance:	250-500				
Event Description: Include each activity, when activities take place, etc.	Youth Football and Cheer League for Florida Elite/Fellowship Lions Playoff Game to be held at Jerry Brooks Community Park on both fields for the 2024 Season.				
Hours of Operation:	Monday-Friday 5pm-9pm and Saturday 6am-10p				
STRAP # of Parcel:	124524010000B0000				
Owner of Premises*:	Lee County Parks and Recreation				

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

# Fellowship Lions 2024 Game Schedule

@ Kickoff Classic
@ Northport Bobcats
@ Pressure House Academy
(Home) Countryside Jr Cougars
(Home) Tampa Wolverines
@ Cypress Lake Hornets
(Home) West Orlando Jaguars (Odds)
@ Sarasota Seminoles
(Home) Pinellas Park Thunderbirds
(Home) Pressure House Academy (D2)
(Home) Polk Elite
(Home) Playoffs
(Home) Playoffs
(Home) Playoffs
(Home) Playoffs

Game Times are standard across Florida Elite but are subject to change.

Rookies: 9am

Freshman: 10:30am

Sophomore: 12pm

Juniors: 2pm

Seniors: 4pm

Gate Prices: Any form of payment other than Cash will be an additional charge.

NO OUTSIDE FOOD or DRINKS

Adults \$10 Kids: \$5



What is the Zoning Classification of the	premises? Com	mercial/Ind	ustrial
Are any temporary structures to be insta	alled for the event?	┌─ Yes ເҳ No	Type:
Do you have the appropriate permits for	r the temporary stru	ictures?	⊤Yes
* For a 'Special Event' and 'Use of Count dentified, including all parking areas.			
Insurance Company Insuring the Event:		n Sports Inc	dustries
Note: Certificate of Insurance must be submitted	d at time of application		
Surety Company Bonding this Event (Na	ame and Address):		
Will Vehicles be Used as Part of This Event?	Will Food be Avai	lable at this Event?	Will Alcoholic Beverages be served/consumed at this Event?
┌─Yes	▼ Yes	L No	├ Yes
If yes, automobile coverage must be included on the certificate of insurance.		ility coverage must be rtificate of insurance.	If yes, liquor liability coverage must be included on the certificate of insurance.
Providing Food:			Football Association
Type of Food being Served:	essions- Ho	t and Cold	food and beverages
Section II - USE OF COUNTY P Organization Sponsoring the Event:	ROPERTY PERM	IIT	
Section III - SALE/CONSUMP	TION OF ALCHO	LIC BEVERAGES	PERMIT
Is alcohol being sold/consumed on Cou	unty Property?		Yes X No
If Yes, then a "Lee County Alcohol Permit" is required	d. Only non-profit organizat	tions can sell alcohol on Cou	nty Property.
Non-profit certificate/registration nur (Required if alcohol is to be <u>SOLD</u> at the event)		:	
Please note: A permit from the State of Florida further details	a Division of Alcoholic Be	verages and Tobacco ma	y also be required; please call (239) 344-0885 for



PRODUCER

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/08/2024

LEAV

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 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).

LEAVE A LEGACY FINANCIAL 4809 E BUSCH BLVD STE 207			FAIONE   (A/C, No.):   (A/C, No.):   E-MAIL							
TAMPA FL 33617			ADDRESS: kiaj@lalfinancial.com							
				INS	URER(S) AFFOR	DING COVERAGE		NAIC#		
	_				INSURE	RA: Fortegra	Specialty Insu	rance Company		# 16823
INSL					INSURE	RB: AXIS Ins	surance Compa	ıny		# 37273
	J&J YOUTH SPORTS INDUSTRIES				INSURE	RC:				The second secon
A TOTAL OF THE POPULATION OF T			INSURER D:							
			INSURER E :							
	VERAGES CEI	TIEIC	ATE NUM	RED.	REVISION NUMBER:					
T IN	VERAGES  VERTIFY THAT THE POLICIE IDICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	OF INEQUIRE PERTAL POLICE	SURANCE MENT, TEI IN, THE IN ES. LIMITS	LISTED BELOW HA RM OR CONDITION ISURANCE AFFORD	OF AN' ED BY	THE POLICIES REDUCED BY	OR OTHER I S DESCRIBEI PAID CLAIMS	OCCUMENT WITH RESPE	U 10	WHICH I HIS
INSR LTR	TYPE OF INSURANCE	ADDL S	UBR VVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT		
Α	X COMMERCIAL GENERAL LIABILITY			000001-02-C22451		7/2/2024	7/2/2025 12:01 AM	EACH OCCURRENCE	\$ 1,000	000,0
l	CLAIMS-MADE X OCCUR					12:01 AM	12.01 ANI	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,0	000
	X Participant							MED EXP (Any one person)	\$ 10,00	00
	y Sexual Abuse							PERSONAL & ADV INJURY	s 1,000	0,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 3,000	,000
	PRO-			B 60 00 00 00 00 00 00 00 00 00 00 00 00				PRODUCTS - COMP/OP AGG	\$ 2,000	,000
İ	77							SEXUAL ABUSE AGG	\$ 2,000	0,000
<u> </u>	OTHER:	+-+	KSG1	1000001-02-C2245	1	7/2/2024	7/2/2025	COMBINED SINGLE LIMIT	\$ 1,000	000
Α	AUTOMOBILE LIABILITY		11001	000001 02 022 10		12:01 AM	12:01 AM	(Ea accident) BODILY INJURY (Per person)	s	
	ANY AUTO ALL OWNED SCHEDULED							BODILY INJURY (Per accident)	s	
	AUTOS AUTOS							PROPERTY DAMAGE	\$	*****
	X HIRED AUTOS X AUTOS							(Per accident)	s	
					ļ			1	-	
	UMBRELLA LIAB OCCUR					-		EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MAD	E						AGGREGATE	\$	
	DED RETENTION \$				<u> </u>			DED OTH	S	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER OTH- STATUTE ER		Andrews are seen as a second s
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDENT	\$	
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	۱۰۰۰۱						E.L. DISEASE - EA EMPLOYER	5	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	
В	Participant Accident Coverage		SRPC	DAGI-ESA202344		7/2/2024 12:01 AM	7/2/2025 12:01 AM	Accident Medical Expense Bene	efit	\$100,000
	Excess Coverage		200					Accident Medical Expense Dedu	uctible	\$500
DE	SCRIPTION OF OPERATIONS / LOCATIONS / VEH	CLES (A	CORD 101, A	dditional Remarks Sche	dule, may	be attached if mo	ore space is requ	ired)		
CI	ERTIFICATE OF TEAMS: HE FELLOWSHIP LIONS (6U, 8U, 10U, 12U, 14U,				aller and bases					
	PATER ATE OFFICIALLY BELATES TO BRACE	ICES AN	D GAMES OF	REGISTERED AND RO	STERED F	LAYERS, CHEE	RLEADERS AND	VOLUNTEERS		
l o	F J&J YOUTH SPORTS INDUSTRIES.Sexual Abus bove). THIS POLICY DOES NOT EXCLUDE CONC	e or Sexu	ıal Molestatic	n Liability - \$1,000,000 e	each occu	rrence (included	above)/\$1,000,0	00 aggregate (included		
	ee County Parks and Recreation is named as ar	Addition	al Named Ins	ured on the General Lia	bility Polic	cy.				
CERTIFICATE HOLDER			CAN	CELLATION						
Lee County Parks and Recreation Brooks Park P.O. Box 61101			THI	EXPIRATIO	N DATE TH	DESCRIBED POLICIES BE ( IEREOF, NOTICE WILL CY PROVISIONS.	CANCEL BE DI	LED BEFORE ELIVERED IN		
	on wyers, FL 33906		Fort Myers, FL 33906					1 Shee	<u> </u>	

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# THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

#### **SCHEDULE**

Name Of Additional Insured Person(s) Or Organization(s):			
Lee County Parks and Recreation Brooks Park P.O. Box 61101 Fort Myers, FL 33906			
Information required to complete this Sched	ule, if not shown above, will be shown in the Declarations.		

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:
  - 1. In the performance of your ongoing operations; or
  - 2. In connection with your premises owned by or rented to you.

#### However:

- The insurance afforded to such additional insured only applies to the extent permitted by law; and
- 2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/08/2024

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certificate holder in lieu of such endorsement(s).		
PRODUCER	CONTACT NAME:	
LEAVE A LEGACY FINANCIAL	PHONE (A/C, No, Ext): 1-888-682-1325 (A/C, No):	
4809 E BUSCH BLVD STE 207 TAMPA FL 33617	E-MAIL ADDRESS: kiaj@lalfinancial.com	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	INSURER(S) AFFORDING COVERAGE	NAIC#
	INSURER A: Fortegra Specialty Insurance Company	# 16823
INSURED	INSURER B: AXIS Insurance Company	# 37273
J&J YOUTH SPORTS INDUSTRIES 5004 E FOWLER AVE C258	INSURER C:	
TAMPA FL 33617	INSURER D:	
ATTN: AUBRETTE JOHNSON	INSURER E :	
	INSURER F:	
COVERAGES CERTIFICATE NUMBER:	REVISION NUMBER:	
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED	BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT ICE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO A	IO MUICH IUIS

-		SIONS AND CONDITIONS OF SOCIT				POLICY EFF	POLICY EXP		
INSR LTR		TYPE OF INSURANCE	ADDL S	WVD	POLICY NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS	
A		COMMERCIAL GENERAL LIABILITY			KSG1000001-02-C22451	7/2/2024	7/2/2025	EACH OCCURRENCE \$ 1,000,000	
•		CLAIMS-MADE X OCCUR				12:01 AM	12:01 AM	DAMAGE TO RENTED \$ 300,000	
	V	Participant						MED EXP (Any one person) \$ 10,000	
	$\hat{\mathbf{x}}$	Sexual Abuse						PERSONAL & ADV INJURY \$ 1,000,000	
		'L AGGREGATE LIMIT APPLIES PER:			um verber (de			GENERAL AGGREGATE \$3,000,000	
	X	POLICY PRO-						PRODUCTS - COMP/OP AGG \$ 2,000,000	
								SEXUAL ABUSE AGG \$2,000,000	
	+	OTHER: OMOBILE LIABILITY			KSG1000001-02-C22451	7/2/2024	7/2/2025	COMBINED SINGLE LIMIT \$ 1,000,000	
Α		ANN ALLTO				12:01 AM	12:01 AM	BODILY INJURY (Per person) \$	
	$\vdash$	ANY AUTO ALL OWNED SCHEDULED						BODILY INJURY (Per accident) \$	
	-	AUTOS AUTOS NON-OWNED						PROPERTY DAMAGE (Per accident) \$	
	X	HIRED AUTOS AUTOS						(Per accident)	
_		UMBRELLA LIAB OCCUR						EACH OCCURRENCE S	
		EXCESS LIAB CLAIMS-MADE						AGGREGATE \$	
		DED RETENTION \$			Subtraction			s	
-		KERS COMPENSATION						PER OTH- STATUTE ER	
l		PROPRIETOR/PARTNER/EXECUTIVE			e de recita de la composition della composition			E.L. EACH ACCIDENT \$	
İ	OFFI	CER/MEMBER EXCLUDED?	N/A		a Annual Dura			E.L. DISEASE - EA EMPLOYEE \$	
	if ves	s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT S	
В	1	ticipant Accident Coverage			SRPOAGI-ESA202344	7/2/2024 12:01 AM	7/2/2025 12:01 AM	Accident Medical Expense Benefit \$100,000	
	Ex	cess Coverage						Accident Medical Expense Deductible \$500	

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

THE FELLOWSHIP LIONS (6U, 8U, 10U, 12U, 14U, 16U)

CERTIFICATE SPECIFICALLY RELATES TO PRACTICES AND GAMES OF REGISTERED AND ROSTERED PLAYERS, CHEERLEADERS AND VOLUNTEERS
OF J&J YOUTH SPORTS INDUSTRIES.Sexual Abuse or Sexual Molestation Liability - \$1,000,000 each occurrence (included above)/\$1,000,000 aggregate (included above). THIS POLICY DOES NOT EXCLUDE CONCUSSIONS.

Lee County, a political subdivision and Charter County of the State of Florida its agents, employees, and public officials will be named as an Additional Named Insured on the General Liability Policy.

	AUTHORIZED REPRESENTATIVE
	AUTHORIZED REPRESENTATIVE
PO Box 398 Fort Myers FL 33902	THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
CERTIFICATE HOLDER	CANCELLATION

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# ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

#### SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):		
Lee County Board of County Commissioners PO Box 398 Fort Myers FL 33902		
Information required to complete this Schedule, if not s	nown above, will be shown in the Declarations.	

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:
  - 1. In the performance of your ongoing operations; or
  - 2. In connection with your premises owned by or rented to you.

#### However:

- The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.



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certificate holder in lieu of suc	h endorsement(s).		
PRODUCER  LEAVE A LEGACY FINAN  4809 E BUSCH BLVD STI  TAMPA FL 33617	CIAL	CONTACT NAME: PHONE (A/C, No, Ext): 1-888-682-1325 E-MAIL ADDRESS: kiai@lalfinancial.com	
TAIMFA FL 33017		INSURER(S) AFFORDING COVERAGE	NAIC#
		INSURER A: Fortegra Specialty Insurance Company	# 16823
INSURED  J&J YOUTH SPORTS INDUSTRIES  5004 E FOWLER AVE C258  TAMPA FL 33617		INSURER B: AXIS Insurance Company	# 37273
		INSURER C:	
		INSURER D:	
ATTN: AUBRETTE JOHNS		INSURER E :	
		INSURER F:	
COVEDACES	CERTIFICATE MUMBER:	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. ADDL SUBR POLICY EFF (MM/DD/YYYY) POLICY EXP LIMITS TYPE OF INSURANCE POLICY NUMBER \$ 1,000,000 7/2/2024 KSG1000001-02-C22451 EACH OCCURRENCE COMMERCIAL GENERAL LIABILITY 12:01 AM 12:01 AM CLAIMS-MADE X OCCUR \$ 300,000 PREMISES (Ea occurrence) s 10,000 Participant MED EXP (Any one person) \$ 1,000,000 Sexual Abuse PERSONAL & ADV INJURY \$3,000,000 GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG \$ 2,000,000 PRO-JECT X POLICY

SEXUAL ABUSE AGG \$ 2,000,000 OTHER COMBINED SINGLE LIMIT (Ea accident) 7/2/2024 7/2/2025 KSG1000001-02-C22451 \$ 1,000,000 AUTOMOBILE LIABILITY 12:01 AM 12:01 AM BODILY INJURY (Per person) ANY AUTO SCHEDULED BODILY INJURY (Per accident) ALL OWNED AUTOS AUTOS NON-OWNED PROPERTY DAMAGE (Per accident) Х Х HIRED AUTOS Ś s UMBRELLA LIAB EACH OCCURRENCE **OCCUR** AGGREGATE s **EXCESS LIAB** CLAIMS-MADE DED RETENTION \$ WORKERS COMPENSATION STATUTE AND EMPLOYERS' LIABILITY Y / N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE \$

7/2/2024

12:01 AM

CANCELLATION

7/2/2025

12:01 AM

Accident Medical Expense Deductible **Excess Coverage** DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) CERTIFICATE OF TEAMS:

CERTIFICATE SPECIFICALLY RELATES TO PRACTICES AND GAMES OF REGISTERED AND ROSTERED PLAYERS, CHEERLEADERS AND VOLUNTEERS OF J&J YOUTH SPORTS INDUSTRIES. Sexual Abuse or Sexual Molestation Liability - \$1,000,000 each occurrence (included above)/\$1,000,000 aggregate (included above). THIS POLICY DOES NOT EXCLUDE CONCUSSIONS.

SRPOAGI-ESA202344

GREATER JR FOOTBALL ASSOCIATION AKA FELLOWSHIP LIONS is named as an Additional Named Insured on the General Liability Policy.

Greater Jr Football Association aka Fellowship Lions 50 South Rd Fort Myers, FL 33907	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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E.L. DISEASE - POLICY LIMIT | \$

Accident Medical Expense Benefit

\$100,000

\$500

CERTIFICATE HOLDER

(Mandatory in NH)

В

If yes, describe under DESCRIPTION OF OPERATIONS below

Participant Accident Coverage

THE FELLOWSHIP LIONS (6U, 8U, 10U, 12U, 14U, 16U)

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- 2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.



ype of Production (choose all tl	nat apply):		
TV Movie or Special	TV Series / Pilot	TV Comme	rcial 🦵 Still Photos
Public Service Announceme	nt   Industrial / Documenta	ry C Other:	
Will any of the following be nee	ded or included*?		
Street Closure		┌ Yes	┌ No
Traffic / Crowd Co	ontrol	┌ Yes	┌ No
Fire or Burning		┌ Yes	┌ No
Explosives or Pyro	otechnics	┌ Yes	┌ No
Animals, Large or	Small	┌ Yes	┌ No
Construction of A	ny Kind	┌ Yes	┌ No
Large and/or Nur	nerous Vehicles	☐ Yes	┌ No
Helicopters, Boat	s, etc.	┌ Yes	┌ No
Stunts		┌─ Yes	┌ No
Other		┌ Yes	∏ No
Special Parking Requirements	<b>:</b> :		
	1		
City or County Services Requ	ired: (Personnel, equipment, fa	cilities, etc.)	
The following information is	required for local and state rec	ords on production in	Florida to track the economic impact o
the industry. If exact figures	are not available, please estima	ite as closely as possib	ole.
Number in Cast:	Number in Crew	/: Nui	mber of locals hired:
Total budget:	Estimate amour	nt spent in Lee County:	
Hotel room nights:	Number of shoo	oting days:	
number of room	ms x number of nights		



#### **SECTION I - 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 premises 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.



#### **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.

Signature of Applicant

Print Name of Applicant and Title

8/7/2024 Date Mitness

Print Name of Witness

81712024

Dat



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

Check the	appropriate	box(es)	below:
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	NT DEDIALT			
	INTY PROPERTY PE			
PERMIT TO	SELL AND CONSUM	1E ALCOHO	LIC B	BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMI				
1 1121111 214111	•			
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLE ICANT TO COMPLY	ASE INDICA WITH FOR	THE	BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION EIR EVENT.
Parking:	To be handled by evenired to contain and	ent staff. If a	a larg	ge crowd is anticipated, additional deputies should be g issues.
Deputies (How Many?):	according to the sci	nedule that w ditional game mitted via en	vas p	permit page and the detail request form have been filled out provided on the application and does not include any additional at need be added to the schedule at a later to the Lee County Sheriff's Office Details units no later than
Fee for Services:	There is a four hou Office Details Unit f	r minimum p for cost.	er de	eputy on all LCSO details. Contact the Lee County Sheriffs
Special Arrangements:	If the detail is not p the event may be t The league is resp the event to ensure over the scheduled	he result. LC onsible for co proper cove d detail times	vance SO is onfirm erage s. All o	divance no less than one week prior to the start of each game. See, Lee County Parks & Rec will be notified and cancellation of is not responsible for seeking out payments. The league is responsible for any time worked by deputies changes/additions to game dates or times must be done by a game be cancelled/rescheduled, it is the responsibility of the email with 24 hour notice. Failure to do so will result in full
	Print Name: Signature:	P.		ummins
	oignature.			
	Title:	Com	M	lander
	Date:	9	ĭ	34
		Contract to the second		



# 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.

Check the appropriate box(es) below:

SPECIAL EVENT PERMIT

IX USE OF CC ☐ FILM PERM	OUNTY PROPERTY MIT	PERMIT					
AFTER REVIEWING THE WILL REQUIRE THE APPL				HAT ARRANG	SEMENT	S YOUR OR	GANIZATION
Fire Guards (How Many?)	N/A						
Fee for Services:	N/A						
Flammable Vegetation:	N/A	in the second se					
First Aid Equipment:	CALL 911 IF NEEDED	The Additional Control of the Contro		and the second s	nggaran an		
Fire Extinguishing:	ENSURE EXTINGUISH	HERS ARE PRESENT	NEAR CONCE	SSIONS.			
Special Arrangements:	N/A						
	Print Name:	Nate Burley					
	Signature:	Nate Burley		gitally signed by Nate ste: 2024.09.19 14:51:			
	Title:	Division Chief - Fi	re & Life Safet	у			
	Date:	September 19, 20	)24				

Check the appropriate box(es) below:

# **Lee County Event Permit Application**



# EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY 2000 Main St., Suite #100 FORT MYERS, FL 33901 (239) 533-3911

┌─ SPECIAL EV	ENT PERMIT					
□ USE OF COU	JNTY PROPERTY PE	ERMIT				
PERMIT TO	SELL AND CONSU	ME ALCOHOLIC	BEVERAG	ES WITHIN LEE COUNTY F	ACILITIES	
FILM PERM	IT	8. 2. 3. 4.				
AFTER REVIEWING THE A	APPLICATION, PLEA	SE INDICATE B	ELOW WH	AT ARRANGEMENTS YOU	JR	
ORGANIZATION WILL RE						
	None necessary.					
Treatment Facilities:						
Medical Personnel:	None necessary.	actualization proprieta				
Madical Supplies /	None necessary.					
Medical Supplies / Equipment:						
	A - 15 4 b - 11 f - 11	law all CDC and	LEDOU dire	atives, and the Florida Cove	ornor's Evocut	tivo
Safety Requirements:	Orders concerning			ctives, and the Florida Gove	ation a Execut	1146
				-		
Fee for Services	Not applicable.					
			mergency.	To arrange special event c	overage, cont	act our
Special Arrangements:	office at EMSDetail	l@leegov.com.				
			: 2			
		Douglas B. Hig	idine			
	Print Name:			Digitally signed by Captain Douglas B.	-	
	Signature:	- 77-P	2/4/2-	Higgins Date: 2024.08.25 16:43:18 -04'00'	_	
	Title:	Captain, EMS	Operations			
	Date:	August 25, 202	24		•	
	Date.		and the second s			
			Part of the Part o			

Page |8



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

Check the appropriate box(es) below:

▼ SPECIAL E\	/ENT PERMIT		
┌─ USE OF CC	UNTY PROPERTY	PERMIT	
PERMIT TO	SELL AND CONS	UME ALCOHOLI	BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERN	ИIT		
, ,			
AFTER REVIEWING THE WILL REQUIRE THE APP			E BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION BEIR EVENT.
Parking:	No event parking is	nermitted in Lee	County maintained road right of ways.
Torking.	To event parking is	, permitted in Ecc	county maintained road right of ways.
Ingress and Egress:	Please use all estab	olished means of in	gress and egress.
Special Arrangements:		access and public	or assistance with traffic control as needed. vehicular access shall be maintained on all surrounding Lee
	Print Name:	Nathan Thoman	
	Signature:	Nathaniel C.	homan Digitally signed by Nathaniel C. Thoman Date: 2024.09.20 06:57:47 -04'00'
	Title:	Project Manager	
	Date:	09/20/2024	



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

Check the appropri	ite box(es) below:
• • •	UNTY PROPERTY PERMIT SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LICANT TO COMPLY WITH FOR THEIR EVENT.
llumination:	Field lights will be turned off by 11 pm on Saturday nights.
Parking Areas:	Event organizer must develop a parkign plan with parking attendance to ensure all driveways and streets remain open and clear for emergency vehicles to access the property and fields.
Special Arrangements:	Event organizer must provided adequate staff to ensure crowd control and safety of all players, coaches all the officials and fans. Follow established guidelines set by the Lee County Sheriff's office. Must follow all the Youth League Agreement per building, fire and life safety codes as well as the Parks and Recreation Ordinance (18-12 and 18-27). Ensure any outside vendors are approved as mobile vendors through Lee County Parks and Recreation. Ensure all litter and trash debris is disposed of in the proper receptacles during and after all events. Participants and spectators must disperse and leave the park area to seek safe shelter during lightning alerts and threatening weather.

Print Name: Colleen Via

Signature: Countywide Services Manager

Date: 8/14/2024

Brooks - Fellowshy Lions Venta Fortball 8/31, 9/7, 9/21, 10/5, 10/12, 10/19/14-Playolbs-11/9, 11/16, 11/23, 11/30/24



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

Check the appropriate box(es) belo
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▼ SPECIAL EVENT PERMIT

⋉ USE OF COU	NTY PROPERTY	PERMIT	
PERMIT TO S	ELL AND CONS	UME ALCOHOLI	C BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERMI	Т		
AFTER REVIEWING THE AWILL REQUIRE THE APPLI			E BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION HEIR EVENT.
Insurance Requirements:	limits of One Mill	ion Dollars (\$1,000	nce to include participant legal liability coverage with minimum ,,000) per occurrence to protect against bodily injury and/or ants use of aforementioned event within Lee County.
	Certificate Must I	Read As:	
	and public official with regard to ge	als are automatic a eneral liability. The	and Charter County of the State of Florida, its agents, employees, dditional insureds and includes an automatic waiver of subrogation certificate holder is an additional insured on a primary and to general liability.
Special Arrangements:	political subdivis	ion and Charter Co older and as an add	ubmitted as evidence of the required coverage listing Lee County, a punty of the State of Florida, P.O. Box 398, Fort Myers, FL 33902 as litional insured as listed above.
	Print Name:	Mike Figueroa	
	Signature:	This.	fgin _
	Title:	Risk Program-Mai	ager
	Date:	August 14, 2024	
			¢   11



DATE (MM/DD/YYYY)

CERTIFICATE OF LIABILITY INSURANCE 7/08/2024 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 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). CONTACT NAME: PHONE (A/C, No, Ext): 1-888-682-1325 E-MAIL ADDRESS: kiaj@lallinancial.c PRODUCER FAX (A/C, No): LEAVE A LEGACY FINANCIAL 4809 E BUSCH BLVD STE 207 kiai@lallinancial.com **TAMPA FL 33617** NAIC # INSURER(S) AFFORDING COVERAGE # 16823 Fortegra Specialty Insurance Company INSURER A : # 37273 **AXIS Insurance Company** INSURED INSURER B: J&J YOUTH SPORTS INDUSTRIES INSURER C 5004 E FOWLER AVE C258 TAMPA FI 33617 INSURER D : ATTN: AUBRETTE JOHNSON INSURER E : INSURER F **REVISION NUMBER:** COVERAGES **CERTIFICATE 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. POLICY EFF ADDL SUBR INSR LTR TYPE OF INSURANCE POLICY NUMBER s 1,000,000 KSG1000001-02-C22451 7/2/2024 7/2/2025 COMMERCIAL GENERAL LIABILITY EACH OCCURRENCE Х 12:01 AM 12:01 AM DAMAGE TO RENTED PREMISES (Ea occurrence) s 300,000 CLAIMS-MADE X OCCUR s 10,000 Participant MED EXP (Any one person) s 1,000,000 PERSONAL & ADV INJURY Sexual Abuse s 3,000,000 GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER \$2,000,000 PRODUCTS - COMP/OP AGG \_\_ PRO-POLICY LOC \$ 2,000,000 SEXUAL ABUSE AGG OTHER: COMBINED SINGLE LIMIT (Ea accident) 7/2/2024 7/2/2025 KSG1000001-02-C2245 \$ 1,000,000 AUTOMOBILE LIABILITY 12:01 AM 12:01 AM BODILY INJURY (Per person) ANY AUTO SCHEDULED AUTOS NON-OWNED AUTOS ALL OWNED AUTOS BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) Χ Х HIRED AUTOS UMBRELLA LIAB **EACH OCCURRENCE** OCCUR **EXCESS LIAB** AGGREGATE s CLAIMS-MADE DED RETENTION S WORKERS COMPENSATION STATUTE AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) E.L. EACH ACCIDENT N/A E.L. DISEASE - EA EMPLOYEE \$ f yes, describe under DESCRIPTION OF OPERATIONS below F.L. DISEASE - POLICY LIMIT | S SRPOAGI-ESA202344 7/2/2024 7/2/2025 Accident Medical Expense Benefit \$100,000 Participant Accident Coverage В 12:01 AM 12:01 AM Accident Medical Expense Deductible \$500 **Excess Coverage** DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) CERTIFICATE OF TEAMS: THE FELLOWSHIP LIONS (6U. BU. 10U. 12U. 14U. 16U) CERTIFICATE SPECIFICALLY RELATES TO PRACTICES AND GAMES OF REGISTERED AND ROSTERED PLAYERS, CHEERLEADERS AND VOLUNTEERS OF J&J YOUTH SPORTS INDUSTRIES.Sexual Abuse or Sexual Molestation Liability - \$1,000,000 each occurrence (included above)/\$1,000,000 aggregate (included

above). THIS POLICY DOES NOT EXCLUDE CONCUSSIONS.

Lee County, a political subdivision and Charter County of the State of Florida its agents, employées, and public officials will be named as an Additional Named Insured on the General Liability Policy

	•	
CERTIFICATE HOLDER		CANCELLATION
Lee County Board of County Commissioners PO Box 398 Fort Myers FL 33902 OK 08/14/2024		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
/	This Join -	AUTHORIZED REPRESENTATIVE

ACORD 25 (2014/01) INS025 (201401)

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# THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

#### SCHEDULE

Name Of Additional Insured Person(s) Or Organizat	on(s):
Lee County Board of County Commissioners PO Box 398 Fort Myers FL 33902	
Information required to complete this Schedule, if not sh	own above, will be shown in the Declarations.

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:
  - In the performance of your ongoing operations; or
  - In connection with your premises owned by or rented to you.

#### However:

- The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.



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

Check the appropriat	e box(es) belo	W:		
FILM PERMIT ONLY				
AFTER REVIEWING THE AP WILL REQUIRE THE APPLIC			BELOW WHAT ARRANGEMENTS Y	OUR ORGANIZATION
Special Arrangements:		and the second s		
	N/A			
Other:				
	Print Name:	Miriam Dot	son	
	Signature:	Miriam	Dotaon	_
	Title:	Commun	ications Manager	_
	Date:	8/21/20	24	_
		15	11112	



## Lee County Parks & Recreation 3410 Palm Beach Blvd. Fort Myers, FL. 33916 Phone: (239) 533-7275

Invoice Number:	-
-----------------	---

This permit entitles holder to exclusive use of the following facilities during the hour and date shown below. This permit also serves as a bill. All reservations must be paid for in advance. A nonrefundable ten-dollar (\$10.00) cancellation fee will be applied to facility rental transfers or cancellations received at least 72 hours prior to the facility rental date. Any cancellation made less than 72 hours prior to the facility rental date will not be entitled to any refund. Exceptions to this policy will be made at the discretion of the Parks and Recreation administration staff based on circumstances surrounding the cancellation.

Date issued: 5/29/2024

Approved by:

William MacPhee

Name: Sabrina Woods	Type of Activity: Florida Elite Youth Football League Practices (No Games)			
Address: 4413 7th ST. W.	Organization/Team: Fellowship Lions Youth Football/Cheer			
City/State/Zip: Lehigh Acres, FL 33971	Phone Number: 239.895.8266			
	Times			
Date: June 3rd- November 27th, 2024 Mon-Fri. (as necessary)	From:	6pm	То:	9pm
Date: June 1st-November 23rd Saturday's (as necessary)	From:	9am	То:	4pm
Name of Facility: Jerry Brooks Community Park	Bldg. / Field #: Football & Softball Fields			
Other Comments: WeatherBug Lightning Detection: All outdensteen is activated, all activity must be stop				rocedures; once the alert
Hours:	Rate:		Total Fee	: Fees waived for Non-Profit

# Event Waiver/Release of Liability Form

Title: Supervisor | Parks & Rec Date: 5/29/2024

In consideration of the opportunities afforded me and/or my group by this Event Form, I, the undersigned Applicant, freely agree to and make the following contractual representations and agreements:

- 1. WAIVER AND RELEASE. I. the Applicant, do hereby knowingly, freely, and voluntarily assume all risk and liability for any damage or injury that may result from my and/or my group's use of the County facility and/or my or any person's participation in this Event, identified herein during the time period I and/or my group are using the County facility and/or participating in this Event, and further agree to release. waive, discharge, and covenant not sue Lee County, its officers, agents, employees, and volunteers (all for the purposes herein referred to as "Releasees") from any and all liability or claims that may be sustained by me or any member of my group, participants, and spectators, directly or indirectly in connection with, or arising out of, my group's use of the County facility or participation in this Event as described herein, whether caused in whole or in part by the negligence of Lee County or the Releasees.
- 2. INDEMNIFICATION. I, 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, participation in any event 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 the Event, or arising during such term from any act of negligence of the Applicant, members of Applicant's group, any



### Lee County Parks & Recreation 3410 Palm Beach Blvd. Fort Myers, FL. 33916 Phone: (239) 533-7275

participant in this Event, any spectator, Applicant's agent, contractors, or employees, or arising from any accident, injury or damage whatsoever, however caused, to any person or persons, or to any property or any person, persons, corporation or corporations, occurring during the Event 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.

- 3. INSURANCE. The Applicant, at its sole expense, agrees to procure and maintain in force during the entire time of the Event, general liability insurance in the amounts determined by Lee County Risk Management to protect against damages from negligence, gross negligence willful and wanton acts or other claims arising from the 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 named insured" on the Certificate of Insurance, and the Certificate must be delivered to Lee County prior to Applicant's use of the property.
- 4. PARTICIPANT'S GENERAL LIABLITY INSURANCE COVERAGE. APPLICANT WILL CONFIRM GENERAL LIABILITY COVERAGE INCLUDES COVERAGE FOR PARTICIPANTS AND SPECTATORS. This Participant's general liability coverage will be primary before Lee County's self-insured liability or any insurance procured by Lee County. The insurance may not be canceled during the time 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 of the Applicant.

I agree that I have read this form, fully understand its terms, and understand that I, or anyone who may claim to have rights on my behalf, have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend to be a complete and unconditional release of any and all liability to the greatest extent allowed by law and agree that, if any portion of this contract is held to be invalid, the balance notwithstanding shall continue in full legal force and effect.

APPLICANT'S NAME

SIGNATURE OF APPLICANT

FORM OF I.D. PRESENTED

DATE

ALCOHOLIC BEVERAGES ARE NOT ALLOWED IN PARKS OR FACILITIES

### YOUTH LEAGUE AGREEMENT

WHEREAS, League and the County recognize the need for public recreational facilities that contribute to a better quality of life for all facility patrons; and

WHEREAS, the League and the County are mutually interested in promoting youth sports and are aware of the beneficial effect on the youth, their families, and the community; and

WHEREAS, in the interest of providing the best possible youth sports program at the least cost to participants and users of League and the County is necessary; and

WHEREAS, League agrees to assist County with respect to maintenance of a certain facility in exchange for the right to schedule league games at the designated facility; and

WHEREAS, it is in the best interest of the parties to outline the details of such cooperation.

NOW, THEREFORE, in consideration of these promises, the County does hereby agree to make certain improvements to County facilities, and League agrees to participate in the maintenance of the entire facility used as follows:

#### A. RECITALS

The above recitals are true and correct and incorporated herein as though fully set forth below.

### B. COUNTY FACILITY

1. League agrees to participate in the maintenance of the following facility in exchange for the right to schedule games for various youth programs:

Name of facility: Jerry Brooks Community Park

Address/location of facility: 50 South Rd. Fort Myers, FL 33907

League Sport: Florida Elite Youth Football League

Revised 03/2023

- 2. League understands the County facility that is the subject of this Youth League Agreement may not meet the High School Athletic Association requirements, specifications, or guidelines; and, the County is neither responsible for ensuring compliance with these requirements nor liable for any claims in the event the facility does not meet the requirements, specifications or guidelines of the High School Athletic Association.
- 3. The County reserves the right to cancel league play, without notice, during any period of this license agreement. Other tournaments and all-star games may be added with consent by County.

# C. COUNTY MAINTENANCE RESPONSIBILITIES

The County is responsible for the following maintenance activities:

- 1. Mowing of the athletic fields and common areas.
- 2. Coordinating the irrigation and lighting of the fields.
- 3. Coordinating fertilization, herbicide treatment, pesticide treatment, and fungicide treatment.
  - 4. Public restroom maintenance.
  - 5. Maintenance of building infrastructure.
- 6. Providing annual training of League volunteer staff as to recommended maintenance procedures and safety precautions. Training of new volunteers recruited during the season is the responsibility of the League. The county will provide the League with a written outline of necessary maintenance and operational procedures for League use.
  - 7. Removal of trash from receptacles and into dumpsters.
- 8. Initial painting or chalk lining of foul lines, football, soccer, and lacrosse layouts before the season begins. All other painting and chalking required during the season will be the League's responsibility. The county will provide the equipment and materials required to chalk and paint fields. League is responsible for the maintenance and repair of equipment owned by Lee County during the League's season. County will paint and chalk fields during County-sponsored tournament play.
- 9. Providing staff to chalk, paint and maintain fields during countywide tournament play. Staff will remain at the facility until the completion of the final game when applicable and as determined by the County.
  - 10. Providing trash bags, litter grabbers, and receptacles.

#### D. LEAGUE MAINTENANCE RESPONSIBILITIES

League is responsible for the following maintenance activities:

- 1. Picking up all trash and litter from areas that will be used by the League. The only exceptions are the playground and pavilion areas.
- 2. Replacing chalk lining and painting material, as well as equipment damaged, lost, or stolen during the term of this Agreement.
- 3. Obtaining utility service directly from the utility entity, unless otherwise agreed upon by the County. In those facilities where meters cannot be installed, League will pay an estimated charge to the county per season for concession rental. (The estimate will be made by the local power company with League and County representatives in attendance). In the event League fails to timely pay utility invoices, the County will have the right to pay the outstanding charges and seek repayment from the League. If this occurs, County may terminate this Agreement and/or refuse to grant future rights to the League for concession or field use. Upon completion of the season, meter charges will cease. League will ensure that all equipment in the concession stand belonging to League is turned off following the completion of the season unless the County specifically agrees to an alternate arrangement.
- 4. Purchasing a dumpster for the season. The County will provide space for the dumpster to be placed.
- 5. League spaces located on County property must be maintained to County standards. County may inspect said spaces without notification to ensure League complies with standards.

#### E. GENERAL REQUIREMENTS

- 1. County will advise the League of any outside requests for field usage during permitted dates and times. League will be permitted to use the facility during the primary scheduled League season but will cooperate with other groups wishing to use the facility.
- 2. League will provide County with a detailed season schedule at least 2 weeks before the season starts. Any additional changes shall be provided to County within a minimum of 24 hours.
- 3. League will advise Lee County Parks and Recreation of changes in the Presidency of the League within two weeks of the new term. League will provide the name and telephone number of the new president. County site supervisor and the new president will confirm an existing contract.

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- 4. Any necessary maintenance functions not performed in a timely fashion by League will be awarded at County's discretion to an outside vendor to be performed and billed directly to League. League agrees to pay the bill within 30 days after receipt.
  - 5. The League must ensure that:
    - a) All coaches must attend the Code of Conduct Clinic and sign the Coaches Code of Conduct form provided by Lee County and;
    - b) All parents or guardians sign the Youth Sports Parent Code of Conduct.
    - c) The Coaches Code of Conduct form must be provided to County before the use of the Facility.
    - d) The Coaches Code of Conduct form and the Youth Sports Parent Code of Conduct form are attached as Exhibit "A".
- 6. All League officers are responsible to monitor and enforce Lee County's Code of Conduct policies to provide children using the County's sports fields and facilities with a safe sports environment that is free from drugs, tobacco, and alcohol. Smoking is prohibited on school district property and some sports facilities may have designated smoking areas.
- 7. All League presidents are responsible for verifying that the League's coaches have had Level 1 background screenings before the use of the Facility. A copy of the Level 1 background screenings must be provided to County with the Coaches Code of Conduct form. Additionally, County reserves the right to request new Level 1 background screenings at any time during the season. If the Level 1 background screening results of a League coach are not satisfactory to the County, the League agrees to dismiss the coach. A copy of the affidavit must be provided before the start of the season. Failure to comply with this provision may result in immediate termination of this Agreement by the County without the notice required in Section F below.
- 8. When Lee County Parks and Recreation and/or the Lee County Sports Development sponsors events, all facilities, including concession stands, must be made available to the County before the event. Lee County Parks and Recreation will give the League at least 30 days' notice before the event's beginning date.
- 9. If the League requires armed security for its event, the League may use only State or local law enforcement officers. No other form of armed security is allowed on County property. Violation of this provision may result in immediate termination of this Agreement by the County without the notice required in Section F below.
- 10. If League is using a facility that is equipped with an early lightning alert system (WeatherBug), the League must be aware of, and comply with, the following safety procedures:

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- a) Once the alert system is activated, all activity must be stopped and everyone at the facility must seek safe shelter.
- b) Coaches are required to use mobile phone alert notifications to monitor storm information. Access to the notification system will be provided by County to Coaches.
- c) Before starting or resuming activity at the facility, League must ensure the visual alert strobe light has not been activated.
- d) If you are at a facility that does not have an alert system or the visual and audible alerts are not evident, please follow the National Weather Service 30/30 lightning rule.
- 11. League shall adhere to County recommendations including but not limited to field condition and preventative maintenance procedures. Procedures are set forth by County personnel during the term of this agreement and are subject to change.
- 12. League failure to comply with any condition outlined in this Agreement may result in immediate termination of the agreement upon Lee County Parks & Recreation Director's approval.
- 13. The League may not transfer or assign its rights to field usage under this Agreement to a third party without prior written consent and approval from the County. The League agrees to provide written notice to the County if the League desires to do so.
- 14. The league does not have the right under this Agreement to invite vendors to sell products, goods, or services without prior written consent and approval from the County. The League agrees to provide written notice to the County if the League desires to do so.

#### F. NOTICES

Whenever notice shall be given by either party to the other, notice shall be in writing and sent to the address of the party being notified at the addresses set forth below. Notice may be given by hand delivery or by postage-paid certified or registered mail with return receipt requested. Notice given by hand delivery shall be deemed to have been given upon receipt by the party being notified. Notice given by certified or registered mail shall be deemed to have been given at the time return receipt is signed for, provided, however, that if delivery is refused or the notice is unclaimed, notice shall be deemed received five (5) days after the same shall have been deposited in the mail. The League must provide any change of address to the County within 14 days of the change.

League contact information:

Name:

Sabrina Woods

Address (mailing): PO Box 61101 Fort

Myers, FL 33906

Address (physical):

Phone:239.895.8266

Email: swoods111684@gmail.com

County contact information:

Name: William MacPhee

Address: 3410 Palm Beach Blvd. Fort

Myers FL 33916

Phone: 239.340.0397

# G. CAPITAL IMPROVEMENTS PROJECTS

- 1. Currently budgeted or future project requests will only be considered for approval upon successful performance of this Agreement.
- 2. It is the policy of Lee County not to construct Capital Improvements that will negatively impact the limited resources of the Parks and Recreation Department.
- 3. Facility additions, structures, or construction of any kind is not permitted on County property without the <u>prior written approval</u> of the Lee County Parks and Recreation Director. Any additions or changes to the County facility will be required to comply with all applicable County regulations, including building codes and permitting provisions.
- 4. The use of grills, oil/grease fryers (propane or electric), and other equipment on County property is not permitted unless specifically approved in writing by the Lee County Parks and Recreation Director, his/her designee, or area supervisor. All grills must be fenced in and secured at least 40' away from any buildings. Any use of this additional equipment on County property will be required to comply with County regulations, including those regarding fire safety, life safety, and building codes. The County will not be liable for any damage or injury related to the use of this additional equipment, notwithstanding any approval granted allowing the use; and, League will be responsible for reimbursement to the County for any loss or damage associated with the use of the additional equipment.

#### H. TERM

The term of this Agreement shall not exceed six months beginning on August 1<sup>st</sup>, 2024 and ending on January 31<sup>st</sup>, 2025. The County or the League may terminate this Agreement at any time upon 30 days written notice, unless otherwise expressly stated within this Agreement. Written notice must be provided by Section F.

### I. SPECIAL EVENTS

If the League desires to sponsor an event that the League anticipates will precipitate attendance by 1000 or more people, including players and coaches, the

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League must obtain a special events permit from Lee County, by County requirements, at least two weeks before the event. Failure to obtain the necessary permit is grounds for termination of this Agreement. In addition, the County reserves the right to limit the number of fields that can be utilized and to limit the maximum number of participants who may utilize one or more fields subject to this Agreement.

### J. INSURANCE

The League shall, on a primary basis and at its sole expense, maintain in full force and effect, at all times during the life of this Agreement, insurance coverage (including endorsements) and limits as described in Exhibit "B". These requirements, as well as the County's review or acceptance of insurance maintained by the League, are not intended to and shall not in any manner limit or qualify the liabilities or obligations assumed by League under this Agreement. Insurance carriers providing coverage required herein must be licensed to conduct business in the State of Florida and must possess a current A.M. Best's Financial Strength Rating of B+ Class VII or better. No changes are to be made to these specifications without prior written specific approval by County Risk Management. A Certificate of Insurance, consistent with Exhibit "B" must be provided to the County before it executes this Agreement. Further, the Certificate of Insurance shall name the County - Lee County Board of County Commissioners - as a certificate holder and as an additional insured.

#### K. INDEMNIFICATION

League hereby indemnifies and holds the County harmless from any and all claims, liability, losses, damages, and costs, including but not limited to reasonable attorney's fees and causes of action that may arise out of the willful, negligent, reckless, intentional wrongful misconduct or unlawful acts or omissions of League, its employees, volunteers and/or players. The League will pay all claims and losses of any nature whatsoever arising from actions under this Agreement; will defend all suits against the County, when applicable, including appellate proceedings; and, pay all costs, judgments, and attorney's fees. The County retains the right to choose its own counsel and the League will reimburse its legal fees and costs. Nothing herein may be construed to require League to indemnify County against liability resulting from the willful, negligent, or unlawful acts or omissions of the County, its employees, or agents acting within the scope of their employment pursuant to the provisions of this Agreement. This section shall survive the termination or expiration of this Agreement.

#### L. COMPLIANCE WITH APPLICABLE LAW

This Agreement shall be governed by the laws of the State of Florida. League shall promptly comply with all applicable federal, state, county, and municipal laws, ordinances, regulations, and rules relating to the services to be performed hereunder and in effect at the time of performance. The League shall conduct no activity or provide any service that is unlawful or offensive.

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# (INTENTIONALLY LEFT BLANK, CONTINUED ON NEXT PAGE)

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**IN WITNESS WHEREOF**, the Parties hereto have caused this Agreement to be executed on the day written above by their respective officers, therein duly authorized.

League Witness: Print Name: Name/Title: Sabrina Woods/President Entity Name: Greater Ft. Meyers Jr. Football Association, Inc. Witness: Print Name: FR. LEE COUNTY PARKS AND RECREATION Mack Young, Director [] Alise Flanjack, Deputy Director / [] Kathy Loomis, Deputy Director Date: Approved as to Form for the Reliance of Lee County Only: eunty Attorney's Office

Attachments:

Exhibit A -Youth Sports - Coaches & Parent/Guardian Code of Conduct Forms

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Department of State / Division of Comporations / Search Records / Search by Entity Name /

# **Detail by Entity Name**

Florida Not For Profit Corporation

Filing Information

**Document Number** 

713396

FEI/EIN Number

59-1774693

Date Filed

09/29/1967

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FL

State Status

ACTIVE

Last Event

REINSTATEMENT

**Event Date Filed** 

06/02/2003

Principal Address

50 SOUTH RD

FT. MYERS, FL 33907

Changed: 01/23/2016

Mailing Address

PO BOX 61101

FORT MYERS, FL 33906

Changed: 05/10/2016

Registered Agent Name & Address

WOODS, SABRINA

4413 7TH ST W

Lehigh Acres, FL 33971

Name Changed: 01/13/2022

Address Changed: 01/18/2023

Officer/Director Detail

Name & Address

Title President

Woods, Sabrina

4413 7TH ST W Lehigh Acres, FL 33971

# **Annual Reports**

Report Year	Filed Date
2022	01/13/2022
2023	01/18/2023
2024	04/03/2024

# **Document Images**

04/03/2024 ANNUAL REPORT	View image in PDF format
01/18/2023 ANNUAL REPORT	View image in PDF format
01/13/2022 ANNUAL REPORT	View image in PDF format
02/01/2021 ANNUAL REPORT	View image in PDF format
01/16/2020 ANNUAL REPORT	View image in PDF format
01/09/2019 ANNUAL REPORT	View image in PDF format
02/03/2018 ANNUAL REPORT	View image in PDF format
01/24/2017 ANNUAL REPORT	View image in PDF format
01/23/2016 ANNUAL REPORT	View image in PDF format
06/29/2015 ANNUAL REPORT	View image in PDF format
11/04/2014 AMENDED ANNUAL REPORT	View image in PDF format
04/22/2014 ANNUAL REPORT	View Image in PDF formal
05/01/2013 ANNUAL REPORT	View image in PDF format
94/30/2012 ANNUAL REPORT	View image in PDF format
04/25/2011 ANNUAL REPORT	View image in PDF format
06/16/2010 ANNUAL REPORT	View image in PDF format
93/31/2009 ANNUAL REPORT	View image in PDF format
06/20/2008 ANNUAL REPORT	View Image in PDF formal
06/06/2007 ANNUAL REPORT	View image in PDF format
04/28/2006 ANNUAL REPORT	View image in PDF format
04/25/2005 ANNUAL REPORT	View image in PDF formal
08/03/2004 ANNUAL REPORT	View image in PDF format
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