



EVENT PERMIT

Ordinance 17-08



Cypress Lake Hornets Elite LLC

PERMIT NUMBER: TMP2026-00223

Date(s) of Event: September 12, 2026, September 19, 2026, September 26, 2026, and October 3, 2026 from 8:00am until 9:00pm each day

Property Owner: LEE COUNTY

Applicant: David Quintanilla
2397413051

Description: Youth Football and Cheerleading

Location of event: 6500 SOUTH POINTE BLVD, FORT MYERS, FL 33919

Will the event be attended by 1000 or more people ? Yes

Will the event be held on County Owned Property ? Yes

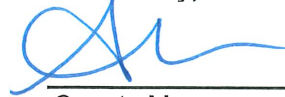
Will there be alcohol consumed or sold at the event ? No

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

 8/25/26
County Manager Date



Lee County
Southwest Florida

Event Application

Special Event

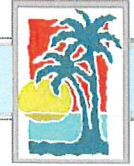
Use of
County
Property

Alcohol
within Lee
County
Facilities

Film, Video
&
Photography

TMP2026-00223

Lee County Event Permit Application



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 INFORMATION (All Permit Types)	
Title of Event / Name of Production	Cypress Lake Hornets Elite LLC
Date(s) of Event / Production:	Games 09/12/26, 09/19/26, 09/26/26, 10/03/26
Location(s) of Event:	Rutenberg Park 6500 South Pointe Blvd Fort Myers FI 33919
Name of Applicant:	David Quintanilla, President
Applicant Address:	6490 South Pointe Blvd Fort Myers FI 33919
Applicant Phone Number:	239-784-3051
Contact Person: (If different from applicant)	
Contact Phone Number: (If different from applicant)	
Email Address:	clhpresident@gmail.com
Estimated Attendance:	1,000 throughout the day
Event Description: Include each activity, when activities take place, etc.	Youth Football and Cheerleading, 6 games per day
Hours of Operation:	8AM-9PM
STRAP # of Parcel:	21-45-24-00-00013-0080
Owner of Premises*:	Lee County

*Notarized statement from the property owner specifically consenting to the proposed use required.

Lee County Event Permit Application



What is the Zoning Classification of the premises? Lee County Parks and Recreation

Are any temporary structures to be installed for the event? ☐ Yes ☒ No Type: _____

Do you have the appropriate permits for the temporary structures? ☒ Yes ☐ No

* For a 'Special Event' and 'Use of County Property' permit, submit a site plan with all proposed facilities and activities identified, including all parking areas.

Insurance Company Insuring the Event: ESP Insurance Brokerage LLC

Note: Certificate of Insurance must be submitted at time of application

Surety Company Bonding this Event (Name and Address): _____

Will Vehicles be Used as Part of This Event? ☐ Yes ☒ No If yes, automobile coverage must be included on the certificate of insurance.	Will Food be Available at this Event? ☒ Yes ☐ No If yes, products liability coverage must be included on the certificate of insurance.	Will Alcoholic Beverages be served/consumed at this Event? ☐ Yes ☐ No If yes, liquor liability coverage must be included on the certificate of insurance.
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Name & Address of Organization Providing Food: Cypress Lake Hornets Elite LLC

Type of Food being Served: concession foods, hamburgers, hot dogs, nachos, water, gatorade,

Section II - USE OF COUNTY PROPERTY PERMIT

Organization Sponsoring the Event: Cypress Lake Hornets Elite LLC

Section III - SALE/CONSUMPTION OF ALCHOLIC BEVERAGES PERMIT

Is alcohol being sold/consumed on County Property? Yes ☒ No

If Yes, then a "Lee County Alcohol Permit" is required. Only non-profit organizations can sell alcohol on County Property.

Non-profit certificate/registration number: N/A no alcoholic beverages to be sold/consumed.
(Required if alcohol is to be **SOLD** at the event)

Please note: A permit from the State of Florida Division of Alcoholic Beverages and Tobacco may also be required; please call (239) 344-0885 for further details

Lee County Event Permit Application



Type of Production (choose all that apply):

☐ TV Movie or Special	☐ TV Series / Pilot	☐ TV Commercial	☐ Still Photos
☐ Public Service Announcement	☐ Industrial / Documentary	☐ Other: _____	

Will any of the following be needed or included*?

Street Closure	☐ Yes	☐ No
Traffic / Crowd Control	☐ Yes	☐ No
Fire or Burning	☐ Yes	☐ No
Explosives or Pyrotechnics	☐ Yes	☐ No
Animals, Large or Small	☐ Yes	☐ No
Construction of Any Kind	☐ Yes	☐ No
Large and/or Numerous Vehicles	☐ Yes	☐ No
Helicopters, Boats, etc.	☐ Yes	☐ No
Stunts	☐ Yes	☐ No
Other	☐ Yes	☐ No

* For any marked Yes, provide further details below:

Special Parking Requirements:

City or County Services Required: (Personnel, equipment, facilities, etc.)

The following information is required for local and state records on production in Florida to track the economic impact of the industry. If exact figures are not available, please estimate as closely as possible.

Number in Cast: _____	Number in Crew: _____	Number of locals hired: _____
Total budget: _____	Estimate amount spent in Lee County: _____	
Hotel room nights: _____ number of rooms x number of nights	Number of shooting days: _____	



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.

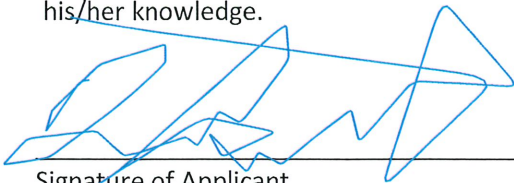


SECTION V - AGREEMENT

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.

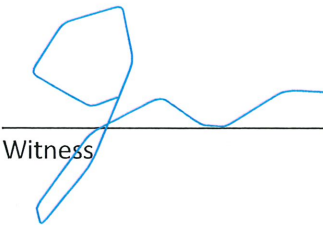

Signature of Applicant

David Quintanilla, President

Print Name of Applicant and Title

July 18, 2026

Date


Witness

Jennifer Quintanilla

Print Name of Witness

July 18, 2026

Date

Lee County Event Permit Application



LEE COUNTY SHERIFF'S DEPARTMENT
14750 SIX MILE CYPRESS PARKWAY
FORT MYERS, FLORIDA 33912
(239) 477-1199

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT
☐ USE OF COUNTY PROPERTY PERMIT
☐ PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
☐ FILM PERMIT

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

Parking:

All parking will remain on site and within authorized areas only. The right-of-way must remain clear at all times. If the event organizer is anticipating a larger than normal turnout, it will be their responsibility to hire additional extra duty detail deputies for assistance.

Deputies (How Many?):

Two extra duty detail deputies will be required per game at vendor's expense. LCSO will make the determination as to whether or not additional detail deputies may be required for games with larger crowds. Extra duty detail deputies will be scheduled according to the dates supplied in this special event permit packet.

Fee for Services:

Contact Details Unit 239-477-1171 for payment arrangements.

Special Arrangements:

It will be the responsibility of the event organizer to make arrangements with LCSO Details Unit if there are any changes including deletions or additions to the supplied schedule in this packet. Event organizer is responsible for confirming all schedules. Any changes must be made via email. Deputies will remain on site as long as staff and participants are present. If there is any amplified sound at events, it must adhere to the Lee County noise ordinance.

Print Name: Joseph Huguio
Signature: [Signature]
Title: Support Services - Commander.
Date: 7/28/26

Carmine Marceno
Sheriff



"Proud to Serve"

State of Florida
County of Lee

Exhibit A
Detail Request Form

Please review all information on this request form for accuracy and, as the vendor, sign at the bottom. 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 may be required 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 detail rates for 2026 will be:

Security/Funeral	\$63/hr	Traffic	\$73/hr
CSA/Dispatch Holiday	\$63/hr	Detail Supervisor	\$80/hr
CSA/Dispatcher	\$50/hr	Holiday Sup/IC	\$90/hr
Boat	\$70/hr	Civil/Prisoner Trans	\$80/hr
Holiday/Last Minute	\$88/hr	Bomb Sweep	\$70/hr

Details are charged a \$15 per deputy vehicle rate (when applicable).

All boat details are charged a \$20 per hour boat rate (when applicable).

Holidays: New Year's Day, Easter Sunday, Memorial Day, 4th of July, Labor Day, Thanksgiving Day, Christmas Eve., Christmas Day, New Year's Eve.

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 without penalty. LCSO cannot guarantee detail coverage.

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 unarmed 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. Weather related cancellations must be made within three (3) hours of the start of the detail. 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. If cancellation notification is not made, and LCSO Detail Deputies show up to the detail, vendor will be billed the four-hour minimum for each deputy.

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, or business check made out to Lee County Sheriff's Office. Credit card payments can be made via telephone. The Lee County Sheriff's Office does not accept cash or personal checks.

Payments can be sent to: The Lee County Sheriff's Office 14750 Six Mile Cypress Pkwy., Fort Myers, FL 33912 ATTN: Finance Department.

Total Deputy(ies) 2 Total Hours 4 hr min Rate per Hour \$63 Vehicle Rate \$15 per dep

Supervisory Deputy(ies) _____ Total Hours _____ Rate per Hour _____ Vehicle Rate _____

Dan
Entity

SIGN HERE



"The Lee County Sheriff's Office is an Equal Opportunity Employer"
14750 Six Mile Cypress Parkway • Fort Myers, Florida 33912-4406 • (239) 477-1000

LCSO Details Main Phone Number: 239-477-1199			
Vendor Information			
Business Name: <u>Cypress Lake Hornets Elite, Inc.</u>			
Street: <u>12901 McGregor Blvd Suite 20-109</u>			
City: <u>Ft Myers</u>	State: <u>FL</u>	Zip Code: <u>33919</u>	
Business Contact: <u>David Quintanilla</u>		Phone: <u>239-784-3051</u>	
Email Address: <u>clhsecretary@gmail.com</u>			
Event Information			
Detail Location: <u>Rutenberg Park</u>			
Street: <u>6500 South Pointe Blvd</u>			
City: <u>Ft Myers</u>	State: <u>FL</u>	Zip Code: <u>33919</u>	
Contact During Event: <u>David Quintanilla</u>		Phone: <u>239-784-3051</u>	
Event Date Start: <u>8/22/2026</u>		Event Time Start: <u>varies by game</u>	
Event Date End: <u>10/3/2026</u>		Event Time End: _____	
Anticipated Crowd Size: <u>1000 throughout day</u>		Type of Event: <u>Pop Warner Football Fall Season</u>	
Additional Security Working Detail: ☐ Yes ☒ No If Yes, how many? _____			
Permits Attached: ☒ Yes ☐ No		Alcohol Served: ☐ Yes ☒ No	
Detail Information			
Security/Funeral ☒	Traffic ☐	Prisoner Trans/Civil ☐	
CSA/Dispatcher ☐	Bomb Sweep ☐	Boat ☐	CSA Holiday ☐
Last Minute/Holiday ☐	Supervisor ☐	Holiday Sup/IC ☐	
Marked Vehicle ☒ Yes ☐ No	Unmarked Vehicle ☒ Yes ☐ No		
Uniformed Deputy ☒ Yes ☐ No	Plain Clothes Deputy ☐ Yes ☒ No		
Detail Description:			
Deputy presence will be required at park for as long as participants & staff are present. Extra duty details will need to be paid for one week in advance. League is responsible for confirming schedule. All changes will need to be sent to Details Unit via email. If a game needs to be canceled or rescheduled, it must be done via email to the Details Unit with at least 24 hours notice. Failure to notify of cancellations will result in charges. Details will be scheduled as: 8/22 830a-930p (\$1668) 9/12 830a-630p (\$1290) 9/19 830a-630p (\$1290) 9/26 830a-630p (\$1290) 10/3 830a-630p (\$1290)			



"The Lee County Sheriff's Office is an Equal Opportunity Employer"
14750 Six Mile Cypress Parkway • Fort Myers, Florida 33912-4406 • (239) 477-1000

Lee County Event Permit Application



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:

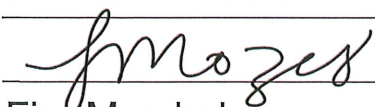
SPECIAL EVENT PERMIT

- ☐ USE OF COUNTY PROPERTY PERMIT
- ☐ PERMIT TO SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- ☐ 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:	NA
Flammable Vegetation:	10 feet clearance to all flammable vegetation.
First Aid Equipment:	Call 911 in the event of an emergency.
Fire Extinguishing:	Extinguishers located at all permanent structures. Call 911 in the event of a fire.
Special Arrangements:	NA

Print Name: Jackielou Mozes

Signature: 

Title: Fire Marshal

Date: 8/19/2026

Lee County Event Permit Application



EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY

2000 Main St., Suite #100

FORT MYERS, FL 33901

(239) 533-3911

Check the appropriate box(es) below:

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FILM PERMIT

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

Treatment Facilities:

None necessary.

Medical Personnel:

None necessary.

Medical Supplies /
Equipment:

None necessary.

Safety Requirements:

Applicants shall follow all CDC and FDOH directives, and the Florida Governor's Executive Orders concerning health and safety.

Fee for Services

Not applicable.

Special Arrangements:

Please call 911 in the event of an emergency. To arrange special event emergency medical coverage (ambulance, cart, etc) or EMS participation, please fill out and submit the form at the following link: [EMS Special Detail Request Form](#)
For questions, contact our office at EMSDetail@leegov.com.

Print Name: Douglas B. Higgins

Signature:

Douglas B. Higgins

Digitally signed by Douglas B. Higgins
Date: 2026.08.09 18:40:56 -04'00'

Title:

Captain, EMS Operations

Date:

August 9, 2026

Lee County Event Permit Application



DEPARTMENT OF TRANSPORTATION
1500 MONROE STREET
FORT MYERS, FL 33901
(239) 533-8580

Check the appropriate box(es) below:

- ☒ SPECIAL EVENT PERMIT
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☐ FILM PERMIT

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

Parking:

No event parking is permitted in Lee County maintained road right of ways.

Ingress and Egress:

Please use all established means of ingress and egress.

Special Arrangements:

Shall use Lee County Sheriff's Office for assistance with traffic control as needed.
Emergency vehicle access and public vehicular access shall be maintained on all surrounding Lee County maintained roads.

Print Name: Nathan Thoman

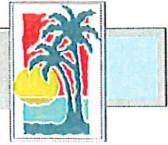
Signature: Nathan Thoman

Digitally signed by Nathan Thoman
Date: 2026.08.03 09:30:57 -04'00'

Title: Project Manager

Date: 08/03/2026

Lee County Event Permit Application



LEE COUNTY PARKS AND RECREATION
3410 PALM BEACH BOULEVARD
FORT MYERS, FLORIDA 33916
(239) 533-7275

Check the appropriate box(es) below:

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Illumination:

Event organizer will need to provide additional lighting if needed. In the event that field lights are needed communicate with the site supervisor.

Parking Areas:

Event organizer must develop a parking 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 provide 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 fire and life safety codes, as well as Lee County and Parks & Recreation Ordinances (25-14, 22-10) and (18-12, 18-27).

Pursuant to Lee County Ordinance No. 25-14, smoking and vaping is not permitted at any school property or within the boundaries of any public park facility or public beach. 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: Trever Snearley

Signature: _____

Title: Countywide Services Manager

Date: 7/20/2026

RUTENBERG PARK - HORENTS HOME FOOTBALL GAMES

(9/12, 9/19, 9/26, 10/3/2026)

Page 10

ADDSTON (8/22/26)

Lee County Event Permit Application



LEE COUNTY RISK MANAGEMENT
COUNTY ADMINISTRATION BUILDING - 4TH FLOOR
2115 SECOND STREET
FORT MYERS, FLORIDA 33901
(239) 533-2221

Check the appropriate box(es) below:

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☐ FILM PERMIT

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

Insurance Requirements:

Commercial general liability insurance to include participant legal liability coverage with minimum limits of One Million Dollars (\$1,000,000) per occurrence to protect against bodily injury and/or property damage relative to applicants use of aforementioned event within Lee County.

Certificate Must Read As:

Lee County, a political subdivision and Charter County of the State of Florida, its agents, employees, and public officials are automatic additional insureds and includes an automatic waiver of subrogation with regard to general liability. The certificate holder is an additional insured on a primary and noncontributory basis with regards to general liability.

Special Arrangements:

A Certificate of Insurance shall be submitted as evidence of the required coverage listing Lee County, a political subdivision and Charter County of the State of Florida, P.O. Box 398, Fort Myers, FL 33902 as the certificate holder and as an additional insured as listed above.

Subject to proof of insurance.

Print Name: Mike Figueroa

Signature:

Title:

Risk Program Manager

Date:

July 21, 2026

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/08/2026

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME: Joseph Micciche		
ESP INSURANCE BROKERAGE	PHONE (A/C, No, Ext):	FAX (A/C, No):	
101 Creekside Crossing	E-MAIL ADDRESS: joe.micciche@espspecialty.com		
Ste 1700-264	INSURER(S) AFFORDING COVERAGE		NAIC #
Brentwood	TN 37122	INSURER A: HDI Global Insurance Co.	
INSURED	INSURER B: Everest Reinsurance Company	26921	
CYPRESS LAKE HORNETS ELITE INC	INSURER C:		
12901 Mcgregor Blvd	INSURER D:		
Suite 20-109	INSURER E:		
Fort Myers	FL 33919	INSURER F:	

COVERAGES

CERTIFICATE NUMBER: CL266854350

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. LIMITS SHOWN ARE INCLUSIVE OF AMOUNTS REQUESTED BY THE CERTIFICATE HOLDER AND MAY NOT REFLECT POLICY LIMIT AMOUNTS IN EXCESS OF THOSE REQUESTED. *Not Applicable in WY

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	☒ COMMERCIAL GENERAL LIABILITY	Y		HDGL003701751	07/01/2026	07/01/2027	EACH OCCURRENCE	\$ 1,000,000
	☐ CLAIMS-MADE ☒ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
							MED EXP (Any one person)	\$
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	\$ 2,000,000
	☒ POLICY ☐ PRO-JECT ☐ LOC						PLL	\$ 1,000,000
	OTHER:							
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	☐ ANY AUTO						BODILY INJURY (Per person)	\$
	☐ OWNED AUTOS ONLY	☐ SCHEDULED AUTOS					BODILY INJURY (Per accident)	\$
	☐ HIRED AUTOS ONLY	☐ NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
								\$
	UMBRELLA LIAB	☐ OCCUR					EACH OCCURRENCE	\$
	EXCESS LIAB	☐ CLAIMS-MADE					AGGREGATE	\$
	DED	RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y / N		OK 07.21.2026			PER STATUTE	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	☐	N / A				E.L. EACH ACCIDENT	\$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$
B	PARTICIPANTS MEDICAL			AHP1200068-251	07/01/2026	07/01/2027		SEE REMARKS

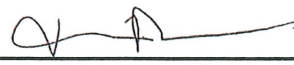
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Lee County, a political subdivision and Charter County of the State of Florida, its agents, employees, and public officials are automatic additional insureds and includes an automatic waiver of subrogation with regard to general liability. The certificate holder is an additional insured on a primary and noncontributory basis with regards to general liability.

Sexual Abuse / Molestation limits are as follows: \$1,000,000 EACH OCCURRENCE / \$2,000,000 AGGREGATE
THIS POLICY DOES NOT EXCLUDE CONCUSSIONS

CERTIFICATE HOLDER

CANCELLATION

Lee County a political subdivision and Charter County of the State of Florida PO Box 398 Fort Myers FL 33902	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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AGENCY CUSTOMER ID: _____

LOC #: _____



ADDITIONAL REMARKS SCHEDULE

Page _____ of _____

AGENCY ESP INSURANCE BROKERAGE		NAMED INSURED CYPRESS LAKE HORNETS ELITE INC	
POLICY NUMBER			
CARRIER	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance: Remarks

YOUTH FOOTBALL AND OR CHEER PARTICIPANTS MEDICAL COVERAGE

CARRIER: EVEREST

POLICY NUMBER: AHP1200068-251

Accidental Death, Accidental Dismemberment (AD&D) Benefit: \$10,000 Maximum amount

Accident Medical Expense Benefit: \$250,000

Deductible: \$250 per accident

Dental Maximum: \$250 per tooth/per accident

Incurral Period: within 90 days of the date of the accident causing the Injury

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

Waiver of Subrogation applies to this insurance package

Primary and non-contributory applies to this insurance package