



## **AUSTRALIAN SHEPHERD CLUB OF AMERICA<sup>®</sup>**

6091 E State Hwy 21  
Bryan, TX 77808  
www.asca.org

P: (979) 778-1082  
F: (979) 778-1898  
agility@asca.org

### **ASCA<sup>®</sup> INSURANCE PROGRAM**

**Insurer**

**Colony Insurance Company**

#### **LIMITS OF LIABILITY**

Commercial General Liability

#### **Bodily Injury and Property Damage Liability**

<b>Combined Single Unit</b>	<b>\$1,000,000</b>
<b>General Aggregate</b>	<b>\$2,000,000</b>

This insurance coverage applies only to the Continental United States of America. NO insurance coverage is afforded for Canada, Mexico or Europe by this insurer.

★If you need insurance coverage for any of the above mentioned locations, please contact the Business Office★

**This insurance policy does not cover ASCA members or participants; only spectators and non-members. It is recommended that ASCA Affiliate Clubs obtain their own insurance policy to cover affiliate members and participants of the event. If you need a recommendation, please contact the Business Office.**

Requests for Certificates of Insurance **MUST be made 30 days prior to event start date.**

If you are required to provide a Certificate of Insurance, please complete form on reverse side and mail, fax, or email to the ASCA<sup>®</sup> Business Office.



# AUSTRALIAN SHEPHERD CLUB OF AMERICA®

6091 E State Hwy 21  
Bryan, TX 77808  
www.asca.org

P: (979) 778-1082  
F: (979) 778-1898  
agility@asca.org

## CERTIFICATE OF INSURANCE REQUEST FORM

★PLEASE PRINT LEGIBLY, TYPING IS PREFERRED★

If you fail to complete all fields, your request cannot be processed

AFFILIATE CLUB					
ADDRESS					
CITY		ST		ZIP	
CONTACT				PHONE	
EMAIL				FAX	

EVENT DATES								
LOCATION OF EVENT (CITY/STATE)								
EVENT TYPE	<input type="checkbox"/> AG	<input type="checkbox"/> CO	<input type="checkbox"/> OB	<input type="checkbox"/> RLY	<input type="checkbox"/> RCH	<input type="checkbox"/> ST	<input type="checkbox"/> TRK	Other:

\*Event Types: AG=Agility CO=Conformation OB=Obedience RLY=Rally RCH=Ranch ST=Stockdog TRK=Tracking

CERTIFICATE HOLDER					
ADDRESS					
CITY		ST		ZIP	
CONTACT				PHONE	
EMAIL				FAX	

<b>Additional Insured Endorsement</b>	<input type="checkbox"/> YES
If the Certificate Holder requests to be added as an Additional Insured under ASCA's insurance, such a request MUST be in writing and you MUST include a copy of the written rental or lease agreement with this request	<input type="checkbox"/> NO

NOTES

Requests for Certificates of Insurance must be made 30 days in advance. Please send your request via email (PREFERRED), mail, or fax, to the address as indicated above. Should you have any questions regarding ASCA's insurance program, please call.