# ACORD.

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 8/02/18

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	K & K Insurance Group, Inc.	CONTACT NAME: MOTORSPORTS			
	P.O. Box 2338	PHONE (A/C, No. Ext): 800-348-1839 FAX (A/C, No):	260-459-5118		
	Fort Wayne, In 46801	E-MAIL ADDRESS: KK.MOTORSPORTS@KANDKINSURANCE.COM			
		INSURER(S) AFFORDING COVERAGE	NAIC #		
		INSURER A: NATIONWIDE LIFE INSURANCE COMP	66869		
INSURED	SPORTS CAR CLUB OF AMERICA, INC.; SCCA PRO RACING, LTD., SCCA FOUNDATION, INC.; SCCA ENTERPRISES, INC.; DES MOINES VALLEY REGION,	INSURER B: NATIONAL CASUALTY COMPANY	11991		
		INSURER C:			
		INSURER D:			
		INSURER E:			
		INSURER F:			
COMPAG					

COVERAGES CERTIFICATE NUMBER: 1948734 REVISION NUMBER:

IND	IS IS TO CERTIFY THAT THE POLICIES OF DICATED. NOTWITHSTANDING ANY REQUI RTIFICATE MAY BE ISSUED OR MAY PER CLUSIONS AND CONDITIONS OF SUCH POLI	IREME	ENT, TE	RM OR CONDITION OF NSURANCE AFFORDED	BY THE POL	RACT OR OTH	HER DOCUMENT WITH RESPECTION RIBED HEREIN IS SUBJECT TO	T TO WHICH THIS ALL THE TERMS.
INSR LTR	TYPE OF INSURANCE		SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)		LIMITS	
	X COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	1000000
В	CLAIMS-MADE X OCCUR				12:01AM	12:01AM	DAMAGE TO RENTED PREMISES (Ea occurrence	1000000
	Owners & Contractors	v		KE00007202500	1/01/18	1/01/19	MED EXP (Any one person)	NC
	X \$250,000 E&O						PERSONAL & ADV INJURY	1000000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	NONE	
	POLICY PROJECT LOC						PRODUCTS-COMP/OP AGG	5000000
	OTHER:						Part Lgl Liab	1000000
	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 X OCCUR						EACH OCCURRENCE	9000000
В	X EXCESS LIAB CLAIMS-MADE			XKO0007202600	12:01AM 1/01/18		AGGREGATE	9000000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N						PER-STATUE OTHER	
	ANY PROPRIETOR/PARTNER/ EXECUTIVE OFFICER/MEMBER EXCLUDED?						E.L. EACH ACCIDENT	
							E.L. DISEASE - EA EMPLOYEE	
(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	
_	DESCRIPTION OF OPERATIONS below		_					
A Participant Accident				KPX0028586400	12:01AM 1/01/18		AD&D Primary Medical Excess Medical Weekly Indemnity	50000 NC 1000000 100 X 104

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

EVENT TYPE: TIME TRIAL/TRACK DAY SANCTION #/EVENT DATE SEE ATTACHED AD LOCATION: RACEWAY PARK OF THE MIDLANDS, PACIFIC JUNCTION, IA
\*\* PA MEMBER LIMITS SHOWN ABOVE SEE ADDENDUM FOR NON-MEMBER PA LIMITS \*\* SANCTION #/EVENT DATE SEE ATTACHED ADDENDUM

## CERTIFICATE HOLDER

## CANCELLATION

RACEWAY PARK OF THE MIDLANDS 19340 JESUP AVE. PACIFIC JUNCTION, IA 51561 ATTN: CANDACE GERBER

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED ACCORDANCE WITH THE POLICY PROVISIONS

AUTHORIZED RE

AGENCY CUSTOMER ID:	
LOC #	

CERTIFICATE: 1948734 DATE ISSUED: 8/02/18

# ACORD.

## ADDITIONAL REMARKS SCHEDULE

Page \_\_\_\_ of \_\_\_

AGENCY K & K INSURANCE GROUP, INC.		NAMED INSURED SPORTS CAR CLUB OF AMERICA, INC.; SCCA PRO RACING, LTD., SCCA FOUNDATION, INC.		
POLICY NUMBER		SCCA ENTERPRISES, INC.;		
GL KE00007202500 PA KPX002858	36400	DES MOINES VALLEY REGION,		
EX XKO0007202600				
CARRIER	NAIC CODE			
SEE ACORD 25		EFFECTIVE DATE: SEE ACORD 25		

#### ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM	IS A SCHEDULE TO ACORD FORM,
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FORM NUMBER: ACORD 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

PARTICIPANT ACCIDENT:

CLASS 1 - NON-MEMBERS AD&D \$30,000 WEEKLY INDEMNITY \$100 X 104 WEEKS MED X \$30,000

## ADDITIONAL INSURED:

- A. ANY PERSON OR ORGANIZATION ENGAGED IN OPERATING, MANAGING, SANCTIONING, SPONSORING THE "COVERED PROGRAM", OR PROVIDING THE "PREMISES" FOR A "COVERED PROGRAM", INCLUDING OFFICIALS OF THE "COVERED PROGRAM".
- B. ANY "PARTICIPANT", "COMPETITION VEHICLE" OWNER AND "COMPETITION VEHICLE" SPONSOR.
- C. RACEWAY PARK OF THE MIDLANDS, IOWA CHAPTER, BMW CAR CLUB OF AMERICA, & BMW CAR CLUB OF AMERICA; BUT ONLY WITH RESPECTS TO THE OPERATIONS OF THE NAMED INSURED.

SANCTION NUMBERS: 18-TT-5856-S / 18-PDX-5857-S

EVENT DATE: 08/11/18

EXCESS AGGREGATE EXISTS ONLY WHERE APPLICABLE.

SPORTS CAR CLUB OF AMERICA, INC. (SCCA); SCCA VENTURES, INC., AND ALL REGIONS, DIVISIONS AND CHAPTERS CHARTERED BY SCCA; ALL SCCA AND REGIONAL DIRECTORS, OFFICERS, OFFICIALS, MEMBERS, DRIVERS, CAR OWNERS, ENTRANTS, PIT CREWS AND ALL OTHER PARTICIPANTS BEARING SCCA AUTHORIZED CREDENTIALS, ALL SPONSORS/ADVERTISERS CONNECTED WITH A CAR OR AN SCCA OR SCCA VENTURES, INC. PRO RACING DIVISION SANCTIONED EVENT WHILE INVOLVED IN AND ACTING IN THEIR CAPACITY DURING THE PRESENTATION OR CONDUCT OF AN SCCA OR SCCA VENTURES, INC. PRO RACING DIVISION SANCTIONED EVENT. THIS INSURANCE IS PRIMARY AND NON-CONTRIBUTORY TO AN ANY OTHER INSURANCE AVAILABLE TO THE ADDITIONAL INSUREDS. A WAIVER OF SUBROGATION IS ALSO INCLUDED.