

**SADLER &  
COMPANY, INC.**

P.O. Drawer 5866, Columbia, SC 29250-5866 Phone (800) 622-7370 Fax 803-256-4017  
email: [amateur@sadlersports.com](mailto:amateur@sadlersports.com)

**TO: AMATEUR SPORTS / LEAGUE INSURANCE OFFICER  
RE: ACCIDENT & GENERAL LIABILITY INSURANCE**

Enclosed is your Accident & Liability Insurance certificate. We have also included forms you may use to add or delete players and/ or field owners.

Please note that if you are receiving your Certificate of Insurance via email or fax, a hard copy will not automatically be mailed. If you should need a hard copy of the Certificate mailed to you, please contact our office.

**WE MUST HAVE ALL CHANGES IN WRITING**

If you should need additional certificates of Insurance issued to property owners not listed on your original application, please submit the name and mailing address of the property owner to us in writing. We will issue and mail them back to you within 6 business days.

You can submit this request via:

- (1) Email: [amateur@sadlersports.com](mailto:amateur@sadlersports.com)
- (2) Fax: 803-256-4017
- (3) Or Through the US Mail

If the property owner requires special wording or forms to be completed, please mail or fax the request and requirements to us.

**Limited Hosted Tournament Coverage** - The Team / League program EXCLUDES COVERAGE when teams outside of the insured team/ league are invited to participate in a tournament hosted by the insured organization. The Hosted Tournament Coverage option must be purchased to secure coverage. If you will be hosting a tournament and inviting teams/ leagues outside of your organization to participate, you will need to purchase this separate coverage. Please see our website to print the application and submit it via fax or mail.

In order to control administrative costs, which result in lower premiums, we don't automatically provide a copy of the master policy (approximately 40 pages) to each client. If you wish to receive a copy, please send a written request to Sadler & Company.

**ACCIDENT CLAIMS:** When you have an injury to a member of your league, please complete one of the enclosed **ACCIDENT INSURANCE CLAIM FORMS**. After the form has been completed, and any necessary bills or receipts attached, mail it to **K&K INSURANCE GROUP, INC., P O BOX 2338, FT. WAYNE, IN 46801**. If you should have any questions about an *ACCIDENT CLAIM*, please call *K&K INSURANCE GROUP* at 1-800-237-2917.

Please note that this coverage is Excess/ Secondary to any other valid and collectible coverage subject to a \$100 deductible. This means if there is other health or accident coverage, all charges must be submitted to them first on a primary basis. If you have other coverage, the other carrier's payment(s) will be used to satisfy our deductible. If you have no other coverage, we will apply the \$100 deductible to the charges received until the deductible has been satisfied.

*If the "other insurance" is in force under a HMO, PPO, or similar plan, the Insured must follow their rules for obtaining benefits, otherwise benefits under this plan may be reduced and the deductible will be charged..*

Please be sure that all blanks are complete, and that both the parent and the authorized league representative have signed the form. After the claim form has been submitted, if there are additional bills please forward them to K&K Insurance Group, Inc. Make sure that your policy number is on the additional bill(s) and that it is noted that it is an additional bill to a previously reported claim.

**LIABILITY CLAIMS:** In the event that someone is injured (other than a routine injury to a participant) or property damaged (other than property of the league), please call K&K INSURANCE GROUP at 1-800-237-2917 to report the incident, or if you should have any questions about a Liability claim which has already been submitted. It is our recommendation that you report all claims regardless of whether, in your opinion, there is liability or not. The attorneys for the insurance company can determine this.

Please familiarize everyone who distributes the claim forms with these procedures so that there will be no delay in the payment of claims. Please do not hesitate to contact **SADLER & COMPANY (SPORTS DEPARTMENT)** if you need additional information or supplies. Please email us at: [amateur@sadlersports.com](mailto:amateur@sadlersports.com) (be sure to include your organization name). As always, if you have any questions, please feel free to call. Our toll free number and switchboard are open from 8:00 a.m. to 5:00 p.m., Eastern Time, Monday through Friday.

Sincerely,

**SPORTS INSURANCE DIVISION**

Email: [amateur@sadlersports.com](mailto:amateur@sadlersports.com)