



Certificate of Insurance - Standard

This is to certify that the Insured named below is insured as described:

*** This form must be completed and signed by your insurer or insurance broker.***
Note: Proof of liability insurance will be accepted on this form only (with no amendments).

Member Club - London Regional Artistic Swimming Club (1045 Wonderland Rd. N London ON N6G 2Y9)

Named Insured Ontario Artistic Swimming			E-mail address mwolk@ontarioartisticswimming.ca		
Insured's address (street name, city, province and postal code) 83 Galaxy Blvd., Unit 2 Etobicoke, ON M9W 5X6			Telephone number (416) 679-9522		Fax number
Type of insurance	Insurance Company (full legal name)	Policy Number	Effective Date Year Month Day	Expiry Date Year Month Day	Limits of Liability (bodily injury & property damage - inclusive)
Commercial General Liability	GameDay Insurance underwritten by Aviva Insurance Company of Canada	SLE00606	2024/04/1	2025/04/1	Occurrence \$ 10,000,000.00 Aggregate \$
<input type="checkbox"/> Umbrella <input type="checkbox"/> Excess					Occurrence \$ Aggregate \$
Other (Explain.)					Occurrence \$ Aggregate \$

Location - Carling Heights Optimist Community Centre - 665 Elizabeth St. London ON N6G 2Y9

Commercial General Liability: **Occurrence Basis**, Including Personal Injury, Property Damage, Broad Form Property Damage, Contractual Liability, Non-Owned Automobile Liability, Owner's and Contractor's Protective Coverage, Products - Completed Operations, Contingent Employers Liability, Cross Liability Clause and Severability of Interest Clause.

Tenant's Legal Liability: NO or YES. . . (Limit) \$ 2,000,000.00

Liquor Liability: NO or YES

THE CORPORATION OF THE CITY OF LONDON, the London Convention Centre, Covent Garden Market Corporation, Museum London o/b London Regional Art & Historical Museums, London Public Library Board, London Police Service, Housing Development Corporation, London and London Middlesex Housing Corporation have been added as an additional Insured but only with respect to their interest in the operations of the Named Insured.

If cancelled or changed in any manner, that would affect the City of London or other scheduled additional Insured for any reason, so as to affect this certificate, thirty (30) days prior written notice by registered mail or facsimile transmission will be given by the insurer(s) to:

The Corporation of the City of London
Attention: Risk Management Division
Office location: **520 Wellington Street, Unit 1**
Mailing address: **P O Box 5035**
London, ON N6A 4L9

Fax: **519 661-4631**
E-mail: **certificates@london.ca**

Motor vehicle liability	Insurance Company	Policy Number	Effective Date (YYYYMMDD)	Expiry Date (YYYYMMDD)	Limits of Liability \$
-------------------------	-------------------	---------------	------------------------------	---------------------------	---------------------------

Motor Vehicle Liability - must cover all vehicles owned, or operated by, or on behalf of the insured.

This is to certify that the Policies of Insurance as described above have been issued by the undersigned to the Insured named above and are in force at this time.

This certificate is executed and issued to the aforesaid Corporation of the City of London, the day and date herein written.	
Name of insurance company or broker (completing form) Arthur J. Gallagher Canada Ltd.	Telephone number
Address 203-435 McNeilly Rd, Stoney Creek ON L8K5E	Fax number
Name of authorized representative or official (Please print.) Amal Aljinko	E-mail address Amal_Aljinko@ajg.com
Signature of authorized representative or official Aaljinko	Date (YYYY-MM-DD) March 28, 2024