

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 Re | gional Artistic Swimming | Club (1045 We | onderland Rd N London | ON N6G 2Y9) |
|-------------------------|--------------------------|---------------|-----------------------|-------------|
| | | | | |

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

Location - Canada Games Aquatic Centre (1045 Wonderland Rd. N 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

 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:

| Office locat Mailing add | on: 520 Wellington S | | | Fax: E-mail: | 519 661 certifica | -4631 ites@london.ca |
|-----------------------------|----------------------|---------------|----------------|-----------------|----------------------|-------------------------|
| Motor | Insurance Company | Policy Number | Effective Date | Expi | ry Date | Limits of Liability |

vehicle liability (YYYYMMDD) (YYYYMMDD) \$

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.) E-mail address Amal Aljinko Amal_Aljinko@ajg.com | | | | | |
| Signature of authorized representative or official | Date (YYYY-MM-DD) | | | | |
| Aaljinko | | March 28, 2024 | | | |

Form no. 0788 (rev.2016.09)