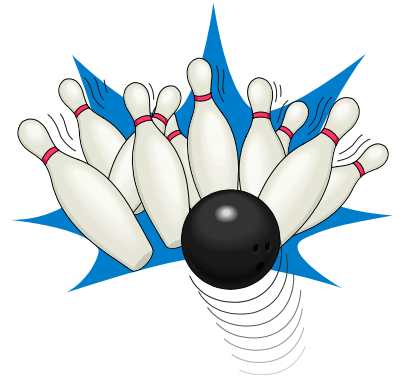


Does Your Association Provide Liability Coverage?



BOWLING IS AMERICA'S GREATEST SPORT!!

The Women's International Bowling Congress (WIBC) provides yet another significant membership benefit. Affiliated associations can secure comprehensive, affordable General Liability Insurance, which covers third party bodily injury, property damage, or personal injury claims. This coverage has been specially tailored to protect members while participating in league and tournament play and other association functions such as board meetings, workshops, and banquets.

In today's litigious society, it has become imperative that associations provide a resource of liability insurance for their members. The Bowling Insurance Program offers uniform coverages and consistent pricing for all associations.

The Anniversary date of coverage is 9-1-03. Applications received after 9-30-03 will be effective the first of the month following receipt of the application, and will expire 8-1-04. There is no pro-ration in the premium cost.

Bowling Liability Insurance Program Coverage Limits

General Total Limit	\$2,000,000
Products/Completed Work Total	\$2,000,000
Each Event Limit	\$1,000,000
Personal & Advertising Injury	\$1,000,000
Premises Damage Limit	\$100,000
Medical Expense Limit	\$5,000

Complete listing of coverage's, conditions, and exclusions are available in the Master Policy.

How do Associations apply for Coverage?

1. Complete the application form on reverse of this page.
2. Calculate your premium using the applicable rate schedule below (***Please circle the applicable premium***).
3. Make your checks payable to ***Lupke-Rice Associates***, and mail to:

Lupke-Rice Associates
Attn: John Kuker
Box 11309
Fort Wayne, IN 46857

Rate Structure - Local Associations

Membership Last Season	Premium
0 - 500	\$145
501 - 1000	\$193
1001 - 2000	\$290
2001 - 5000	\$604
5001 - 7000	\$789
7001 - 10,000	\$1,208
10,001 - and over	\$1,852

Rate Structure - State Associations

Number of State Tournament Participants	Premium
1 - 3,000	\$282
3,001 - 6,000	\$555
6,001 - and over	\$926

If you need assistance or have questions, please call:

John Kuker 1-800-423-4150
Lupke-Rice Associates

WIBC APPLICATION FOR GENERAL LIABILITY COVERAGE

Name of Association: _____

Office Address: _____

City: _____ State: _____ Zip/Postal Code: _____

Contact Person: _____ Phone Number: _____

Additional Insureds (If applicable):

Name: _____

Address: _____

City: _____ State: _____ Zip/Postal Code: _____

Name: _____

Address: _____

City: _____ State: _____ Zip/Postal Code: _____

Local Association: Membership Last Season: _____

State Association: Number of State Tournament Participants: _____

Premium Enclosed: \$ _____

Signature of Association Officer:

Make your check payable to Lupke-Rice Associates, and mail to:

**Lupke-Rice Associates
Attn: John Kuker
PO Box 11309
Fort Wayne, IN 46857**