

## CERTIFICATE OF INSURANCE

In order to participate in the SoCal State Science Olympiad, your school is required to submit a Certificate of Insurance. This certificate of insurance clarifies that your district or insuring agency will provide liability coverage for each school's Science Olympiad participants, including staff and volunteers. Your team may not participate without a correctly completed and received certificate. If the certificate is not received before the registration deadline, your spot may be given to another school.

### **Insurance Certificate Language**

Please provide this exact language information to the district or agency that will produce the Certificate of Liability Insurance or Evidence of Coverage Certificate.

#### Venue and Date:

*April 11th, 2026 SoCal State Science Olympiad program being held on the campuses of the California Institute of Technology (1200 E. California Blvd., Pasadena, CA 91125), and the Polytechnic School (1030 E California Blvd, Pasadena, CA 91106)*

#### Certificate Holder:

*Southern California Science Olympiad and their directors, officers, agents, employees, and volunteers.*

#### Additional Insured:

*The California Institute of Technology, the Polytechnic School, the Southern California Science Olympiad, its officers, agents, employees, and volunteers of each of them.*

### **Insurance Coverage**

Please make sure the insurance covers at least \$2,000,000 per occurrence, and \$4,000,000 general aggregate.

### **Multiple Schools from a District**

Please note that if a district has more than one school participating in the Science Olympiad program, multiple schools may be listed on one certificate.

### **Required Insurance Forms Destination**

Please submit a pdf copy of the Certificate of Insurance via e-mail at: [peterhung@socalscioly.org](mailto:peterhung@socalscioly.org) or it can be mailed to

SoCal Science Olympiad  
4321 W 168<sup>th</sup> St  
Lawndale, CA 90260

Please be sure that the name of the district and school(s) are clearly included in the Certificate of Insurance.

For clerical facilitation, please include the name of the district and the name of the school(s) in the e-mail message that accompanies the certificate.