

## **NOTICE**

## **Instructor & League Policy**

The Board of Directors approved a new policy which requires leagues who conduct matches or practice at the courts and paid instructors who coach or provide lessons, clinics or other organized activities for a fee while utilizing the WI5 recreation facility to be properly insured by providing a Certificate of Insurance (COI) listing the Association as additional insured.

## Please refer to the attached policy for specific details and instructions.

All owners who hire private instructors/coaches to teach on the courts must obtain a COI from them listing the Association as additional insured by *Monday, April 3<sup>rd</sup> 2023*.

Any owners who would like to host adult tennis team league\* or pickleball team tennis league\* must have the league organization provide a COI listing the Association as additional insured.

Failure to follow this policy may result in loss of court privileges at WI5 by the league or instructor.

Mahalo for your kokua and understanding!

\*Note: All leagues must have at least 25% residents per the Court Rules.

Posted: March 2<sup>nd</sup>, 2023



## Instructors and League Policy Form

Waialae Iki 5 Courts, 1959 Laukahi Street, Honolulu, HI 96821 Court Office: (808) 373-1212 | waialae5tennis@gmail.com

The purpose of this policy is to ensure that all Leagues who conduct matches or practice at the Waialae Iki 5 (WI5) Courts, and paid instructors who coach or provide lessons, clinics or other organized activities for a fee while utilizing the WI5 recreation facility, are properly insured. Failure to follow this policy and complete this form may result in loss of court use privileges at WI5 by the League or Instructor. The following policy has been adopted by the Board of Directors as of <u>January 26th</u>, 2023.

All Leagues and Paid Instructors are required to show a certificate of insurance (COI) listing **Waialae Iki 5 Community Association** as an additional insured. A minimum of \$1 million personal injury and property damage liability insurance coverage and facility insurance coverage from or through the USTA, USA Pickleball Association or other similar organizations naming the Association as an additional insured. Please ensure that it lists the following under Certificate Holder:

Waialae Iki 5 Community Association 1959 Laukahi Street Honolulu, HI 96821

Please submit this form along with the COI to the Tennis Director at: waialae5tennis@gmail.com, or to the Pickleball Director at skie111@yahoo.com. You may also mail it to: 1959 Laukahi Street, Honolulu, HI 96821, or submit it directly to the Director at the on-site office.

Approval to proceed with League play or paid/fee based instruction or activities, will be sent to the requesting WI5 Resident. Approved form with COI attachment in hard or electronic form must be readily accessible by League leadership and Instructors when working at WI5.

Resident Name (Print):	
Resident Email:	Phone #:
Resident Address:	
Resident Signature:	
League or Instructor Name:	
COI Attached: Yes / No Effective Date:	Expiration Date:
WI5 APPROVAL For WI5 Court Director or General Manager Use Only DATE RECEIVED:	
Reviewed by (Print Name):	
Approval Signature:	Date: