



FLOYD COUNTY BOARD OF EDUCATION  
Danny Adkins, Superintendent  
106 North Front Avenue  
Prestonsburg, Kentucky 41653  
Telephone (606) 886-2354 Fax (606) 886-4550  
www.floyd.kyschools.us

Sherry Robinson- Chair - District 5  
William Newsome, Jr., Vice-Chair - District 3  
Linda C. Gearheart, Member - District 1  
Dr. Chandra Varia, Member- District 2  
Rhonda Meade, Member - District 4

January 14, 2019

## ISSUE PAPER

**AGENDA ITEM:** Approve the use of a commercial carrier from April 3, 2019- April 7, 2019 (Spring Break) to New York City for the Floyd Central High School Cheerleaders

**APPLICABLE STATUE(S), REGULATIONS, BOARD POLICY/PROCEDURES AND/OR SCHOOL IMPROVEMENT PLAN:**

KRS 156.153

Board Policy 9.36

Certified Common Carrier Service

Use of certified common carrier service shall be authorized by the Board on a case-by-case basis, and the reasons to justify such use shall be cited in the board minutes.

**FISCAL/BUDGETARY IMPACT:** The cost of this commercial carrier will be paid through school activity funds.

**HISTORY/BACKGROUND:** The Floyd Central High School Cheerleaders and coaching staff have devoted a great amount of time practicing this season. Our cheerleaders won a competition in November 2018 in Lexington, KY, thus, granting them a chance to compete at worlds in February 2019 in Florida. However, due to a limited budget, funding was not secured for this trip. In turn, this trip to New York would be an opportunity to reward our cheerleaders for a successful season.

**RECOMMENDATION:** Approve the request for use of a commercial carrier from April 3, 2019 – April 7, 2019 (Spring Break) to New York City for the Floyd Central High School Cheerleaders

**ALTERNATIVE ACTION:**  
Request additional information

**CONTACT PERSON:**  
Greta Thornsberry, Principal  
CaSandra Fulks, Cheerleading Coach

  
Principal

  
Instructional Supervisor

  
Superintendent



KNOXTOU-01

JVITATOE

**CERTIFICATE OF LIABILITY INSURANCE**DATE (MM/DD/YYYY)  
01/03/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

**PRODUCER**  
Van Meter Insurance Group  
Houchens Insurance Group  
505 Wellington Way  
Lexington, KY 40503

**CONTACT** Justin Vitatoe  
**PHONE**  
(A/C, No, Ext): (859) 263-2771  
**FAX**  
(A/C, No): (859) 263-1999  
**E-MAIL**  
**ADDRESS:**

**INSURED**  
Knoxville Tours Inc  
Stewart Lusk  
PO Box 12580  
Knoxville, TN 37912

**INSURER(S) AFFORDING COVERAGE**

**INSURER A:** RLI Insurance Company  
**INSURER B:** LM Insurance Corporation  
**INSURER C:**  
**INSURER D:**  
**INSURER E:**  
**INSURER F:**

**NAIC #**  
13056  
33600

**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>X</b> COMMERCIAL GENERAL LIABILITY					
	CLAIMS-MADE <b>X</b> OCCUR	<b>X</b>	LGB0016411	04/01/2018	04/01/2019	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPROP AGG \$
	GENL AGGREGATE LIMIT APPLIES PER					
	POLICY PRO-JECT LOC					
	OTHER					
A	<b>AUTOMOBILE LIABILITY</b>					
	ANY AUTO OWNED AUTOS ONLY <b>X</b> SCHEDULED AUTOS		LFB0019331	04/01/2018	04/01/2019	COMBINED SINGLE LIMIT (Ea accident) \$ 5,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<b>X</b> HIRED AUTOS ONLY <b>X</b> NON-OWNED AUTOS ONLY					
	UMBRELLA LIAB OCCUR					EACH OCCURRENCE \$
	EXCESS LIAB CLAIMS-MADE					AGGREGATE \$
	DED RETENTION \$					
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>					
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N N/A	WC5395371194018	06/14/2018	06/14/2019	<b>X</b> PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Certificate Holder is Additional Insured in regards to the General Liability as required by written contract.

**CERTIFICATE HOLDER****CANCELLATION**

Floyd County Schools  
106 North Front Ave.  
Prestonsburg, KY 41653

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

**AUTHORIZED REPRESENTATIVE**

ACORD 25 (2016/03)

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