

**PROFESSIONAL SERVICES AGREEMENT BETWEEN  
THE CITY OF DORAL  
AND  
Dojo of Exceptional Wellness, Inc.  
FOR  
SPECIAL NEEDS WELLNESS AND MARTIAL ARTS CLASSES**

**THIS AGREEMENT** is made between **Dojo of Exceptional Wellness, Inc** a Florida corporation, (hereinafter the "Provider"), and the **CITY OF DORAL, FLORIDA**, a Florida municipal corporation, (hereinafter the "City").

**WHEREAS**, the Provider and City, through mutual negotiation, have agreed upon a scope of services, schedule, and fee for Special Needs Wellness and Martial Arts (the "Project"); and

**WHEREAS**, the City desires to engage the Provider to perform the services specified below.

**NOW, THEREFORE**, in consideration of the mutual covenants and conditions contained herein, the Provider and the City agree as follows.

1. **Scope of Services/Deliverables.**

1.1 The Provider shall furnish professional services to the City as set forth in the Scope of Services, attached hereto as **Exhibit "A"**, which is incorporated herein and made a part hereof by this reference.

1.2 The "Scope of Services" includes a Schedule for the Service which includes a breakdown of tasks, timeline and deliverables to the City.

2. **Term/Commencement Date.**

2.1 This Agreement shall become effective upon execution by both parties and shall remain in effect through **March 31, 2020**, unless earlier terminated in accordance with Paragraph 8.

2.2 Provider agrees that time is of the essence and Provider shall complete each deliverable for the Service within the timeframes set forth in the Schedule, unless extended by the City Manager.

3. **Compensation and Payment.**

The Provider shall be compensated in the following manner:

In consideration of and in connection with the classes, programs, and activities, described herein, the Provider shall be paid 70% of each registration fee paid by a participant exclusive of the non-resident surcharge which will be retained by the City and shall not be included in the monthly gross income calculation.

On behalf of the City, the Provider will collect all fees from the participants, retain its compensation and transfer the remainder to the City in the form of a check made payable to: *City of Doral*. Payment to the City must be made within fourteen (14) calendar days after the end of each season. Failure to make timely payment to the City is a breach of this Agreement which may be cured by the Provider paying a \$750 late fee on payments not received within fourteen (14) days after the end of each season and an additional \$750 late fee on payments not received within thirty (30) days after the end of each season.

Along with payment, the Provider shall also submit their pay-out reports and a copy of the participant's registration form and attendance sheets (the City shall provide the spreadsheet template of the pay-out report and attendance sheet to the Provider).

It is the responsibility of the Provider to pay all applicable local, state, and federal taxes associated with this Agreement, and to acquire and pay for all necessary permits, licenses, and insurance required for the execution of this Agreement.

4. **Sub-providers.**

4.1 The Provider shall be responsible for all payments to any sub-providers and shall maintain responsibility for all work related to the Service.

4.2 Any sub-providers used on the Service must have the prior written approval of the City Manager or his designee.

5. **City's Responsibilities.**

5.1 Furnish to Provider, at the Provider's written request, all available maps, plans, existing studies, reports and other data pertinent to the services to be provided by Provider, in possession of the City.

5.2 Arrange for access to and make all provisions for Provider to enter upon real property as required for Provider to perform services as may be requested in writing by the Provider (if applicable).

- 5.3 The City will approve any rates, or the manner for setting such rates charged by the Provider.
- 5.4 The City is responsible for any damage or destruction of the Fields, including that caused by Force Majeure except to the extent identified herein.
- 5.5 The City will approve the operating budget for services performed under this Agreement.

6. **Provider's Responsibilities.**

- 6.1 The Provider shall exercise the same degree of care, skill and diligence in the performance of the Service as is ordinarily provided by a youth baseball program management provider under similar circumstances. If at any time during the term of this Agreement or within one year from the completion of the Service, it is determined that the Provider's deliverables are incorrect, defective or fail to conform to the Scope of Services of the Service, upon written notification from the City Manager, the Provider shall at Provider's sole expense, immediately correct the work. The City in no way assumes or shares any responsibility or liability of the Provider or Sub Provider under this agreement.
- 6.2 Submit an operating budget for the service that provides for registration fees equal to the costs of operating the service.

7. **Conflict of Interest.**

- 7.1 To avoid any conflict of interest or any appearance thereof, Provider shall not, for the term of this Agreement, represent any private sector entities (developers, corporations, real estate investors, etc.), with regard to any City related matter.

8. **Termination.**

- 8.1 The City Manager for any reason may terminate this Agreement upon thirty (30) days written notice to the Provider, or immediately with cause, with cause
- 8.2 Upon receipt of the City's written notice of termination, Provider shall stop providing the Service.

8.3 In the event of termination by the City, the Provider shall be paid for all work accepted by the City Manager up to the date of termination, provided that the Provider has first complied with the provisions of Paragraph 8.4.

8.4 The Provider shall transfer all books, records, reports, working drafts, documents, maps, and data pertaining to the Service to the City, in a hard copy and electronic format specified by the City within 14 days from the date of the written notice of termination or the date of expiration of this Agreement.

9. **Insurance.**

9.1 The Provider shall secure and maintain throughout the duration of this Agreement insurance of such type and in such amounts as required by **Exhibit G**. The insurance carrier shall be qualified to do business in the State of Florida and have agents upon whom service of process may be made in the State of Florida.

9.2 Certificates of Insurance shall be provided to the City at the time of execution of this Agreement and certified copies provided if requested. Each policy certificate shall be endorsed with a provision that not less than thirty (30) calendar days' written notice shall be provided to the City before any policy or coverage is cancelled or restricted, or in accordance to policy provisions. The City further reserves the right to solicit additional coverage, or require higher limits of liability as needed, and depending on the nature of scope, or level of exposure.

10. **Nondiscrimination.**

10.1 During the term of this Agreement, Provider shall not discriminate against any of its employees or applicants for employment because of their race, color, religion, sex, or national origin, and to abide by all Federal and State laws regarding nondiscrimination

11. **Attorneys' Fees and Waiver of Jury Trial.**

11.1 In the event of any litigation arising out of this Agreement, each party shall be responsible for their attorneys' fees and costs, including the fees and expenses of any paralegals, law clerks and legal assistants, and including fees and expenses charged for representation at both the trial and appellate levels.



With a Copy to: Luis Figueredo, ESQ.  
City Attorney  
8401 NW 53<sup>rd</sup> Terrace  
Doral, FL 33166

For The Provider: Francisco Santander  
Executive Director  
Dojo of Exceptional Wellness, Inc.  
11267 NW 58 terrace  
Doral, FL 33178  
Address

14. **Governing Law.**

14.1 This Agreement shall be construed in accordance with and governed by the laws of the State of Florida. Exclusive venue for any litigation arising out of this Agreement shall be in Miami-Dade County, Florida.

15. **Entire Agreement/Modification/Amendment.**

15.1 This writing contains the entire Agreement of the parties and supersedes any prior oral or written representations. No representations were made or relied upon by either party, other than those that are expressly set forth herein.

15.2 No agent, employee, or other representative of either party is empowered to modify or amend the terms of this Agreement, unless executed with the same formality as this document.

16. **Ownership and Access to Records and Audits.**

16.1 All records, books, documents, maps, data, deliverables, papers and financial information (the "Records") that result from the Provider providing services to the City under this Agreement shall be the property of the City.

16.2 The City Manager or his designee shall, during the term of this Agreement and for a period of three (3) years from the date of termination of this Agreement, have access to and the right to examine and audit any Records of the Provider involving transactions related to this Agreement.

16.3 The City may cancel this Agreement for refusal by the Provider to allow access by the City Manager or his designee to any Records pertaining to work performed under this Agreement that are subject to the provisions of Chapter 119, Florida Statutes.

17. **Nonassignability.**

17.1 This Agreement shall not be assignable by Provider unless such assignment is first approved by the City Manager. The City is relying upon the apparent qualifications and personal expertise of the Provider, and such firm's familiarity with the City's area, circumstances and desires.

18. **Severability.**

18.1 If any term or provision of this Agreement shall to any extent be held invalid or unenforceable, the remainder of this Agreement shall not be affected thereby, and each remaining term and provision of this Agreement shall be valid and be enforceable to the fullest extent permitted by law, provided the severance of any term does not result in interest on any Bonds issued to finance the Fields being includable in gross income for federal tax purposes.

19. **Independent Contractor.**

19.1 The Provider and its employees, volunteers and agents shall be and remain independent contractors and not agents or employees of the City with respect to all of the acts and services performed by and under the terms of this Agreement. This Agreement shall not in any way be construed to create a partnership, association or any other kind of joint undertaking, enterprise or venture between the parties.

19.2 The Provider agrees that it will not take any Federal tax position inconsistent with it being a service provider.

20. **Compliance with Laws.**

20.1 The Provider shall comply with all applicable laws, ordinances, rules, regulations, and lawful orders of public authorities relating to the Service.

21. **Waiver**

21.1 The failure of either party to this Agreement to object to or to take affirmative action with respect to any conduct of the other which is in violation of the terms of this Agreement shall not be construed as a waiver

of the violation or breach, or of any future violation, breach or wrongful conduct.

22. **Survival of Provisions**

22.1 Any terms or conditions of either this Agreement that require acts beyond the date of the term of the Agreement, shall survive termination of the Agreement, shall remain in full force and effect unless and until the terms or conditions are completed and shall be fully enforceable by either party.

23. **Prohibition of Contingency Fees.**

23.1 The Provider warrants that it has not employed or retained any company or person, other than a bona fide employee working solely for the Provider, to solicit or secure this Agreement, and that it has not paid or agreed to pay any person(s), company, corporation, individual or firm, other than a bona fide employee working solely for the Provider, any fee, commission, percentage, gift, or any other consideration, contingent upon or resulting from the award or making of this Agreement.

24. **Counterparts**

24.1 This Agreement may be executed in several counterparts, each of which shall be deemed an original and such counterpart shall constitute one and the same instrument.

25. **Removal of Unsatisfactory Personnel**

25.1 The City may make written request to Provider for the prompt removal and replacement of any personnel employed or retained by Provider or any sub provider. The Provider shall respond to the City within fourteen calendar days of receipt of such request with either the removal and replacement of such personnel or with written justification as to why removal is not warranted. All decisions involving personnel will be made by Provider. Such request shall solely relate to said employees work under this agreement. In the event the City Manager disagrees with the justification offered by Provider, the City Manager's decision to replace the employee shall be final.

**IN WITNESS WHEREOF**, the parties execute this Agreement on the respective dates under each signature: The City, signing by and through its City Manager, attested to by its City Clerk, duly authorized to execute same and by Provider by and through its **Executive Director**, whose representative has been duly authorized to execute same.




Attest:

  
\_\_\_\_\_  
Connie Diaz, City Clerk

CITY OF DORAL

By:   
\_\_\_\_\_  
Albert. P. Childress, Acting City Manager  
Date: March 5, 2019

Approved As To Form and Legal Sufficiency for the Use  
And Reliance of the City of Doral Only:

  
\_\_\_\_\_  
Luis Figueredo, ESQ.  
City Attorney

PROVIDER

By:   
\_\_\_\_\_  
Its: Executive Director / CEO  
Date: February 28, 2019

## Exhibit A

### Scope of Services

#### Section 1 - Provider Responsibilities

- 1.1 The Provider's services shall be performed on the days and hours set forth on the Program Request Form submitted for such services, such form set forth as **Exhibit "D"** hereto. **Exhibit "D"** is subject to approval by the Parks & Recreation Department.
- 1.2 The Provider and The Director of the Parks & Recreation Department or his/her designee, hereinafter referred to as the "Department", will agree upon class schedules. **Provider agrees to submit a Program Request Form to the Department for practice and game sessions no less than four (4) weeks prior to the beginning of each session.** All such forms shall be deemed to form a part of this Agreement. Program sessions should allow for setup time for back to back sessions. **The Program Request Form will reflect program sessions held at Doral Legacy Park.** Usage of any other parks or City facilities must be approved by the Parks & Recreation Director or his/her designee.
- 1.3 The Provider must meet minimum student enrollment (5 participants). The Provider agrees to take daily attendance of all students registered for the camp/clinic.
- 1.4 Provider must meet and have a valid certificate of liability insurance as listed in **Exhibit "G"**
- 1.5 The Provider shall stipulate and certify that he/she, as well as all staff members, is qualified to teach the course he/she is hired to teach, maintains the education and required licenses or permits necessary to teach the class and shall continue to maintain such licenses or permits during the tenure of this Agreement. All members of the camp staff who have the responsibility of instructing, facilitating or operating a camp must be 18 or older as well as be listed in the Provider's proposal. All staff under the age of 18 shall not be solely responsible for the supervision of children or overall operation of the camp or its components.
- 1.6 This Agreement is considered a non-exclusive Agreement between the Parties. The City shall have the right to purchase the same kind of services to be provided by the Provider from other sources during the term of this Agreement. The Provider is not precluded from providing the same or similar services for other parties so long as such other engagements do not interfere with the Provider's provision of services to the City.
- 1.7 The Provider shall not promote any privately owned business in a City park/facility or solicit any participant in a City park/facility for any privately owned business. The Provider may not use said facilities to conduct personal business including workshops, clinics, seminars, camps, or any other activities that are outside the scope of service described in

Program Request Form for such program. It is further understood that such action(s) may result in immediate termination of the Agreement and the forfeiture of all compensation due to the Provider. Additionally, the Provider will not permit any other user of the City property without City approval. The Provider may not partner with any other group or organization without the written consent of the City. Fundraisers and sponsorships must also be approved by the City prior to conducting any business.

- 1.8 The Provider shall abide by the rules and regulations of the Department as promulgated from time to time. ***Provider understands and agrees that the Department shall have first priority for use of said facilities, notwithstanding any other provisions of this Agreement.*** The City reserves the right to cancel game or practice sessions for City sanctioned activities or events and agrees to notify the Provider of said cancellations in writing.
- 1.9 All assistants, substitutes, and additional instructors utilized by the Provider must have prior written approval of the Department.
- 1.10 Provider shall provide necessary supervisory personnel to ensure that the participants of the program obey all Department Rules and Regulations.
- 1.11 The City reserves the right to bar any of the Provider's employees, coaches, volunteers, vendors and any other third parties from performing work at all facilities for any inappropriate behavior that does not adhere to guidelines established by the City.
- 1.12 Provider must conduct themselves in a professional manner, particularly in the presence of participants, children and parents.
- 1.13 The Provider's overall program shall include guidelines for safety as well as guidelines for the conduct of league officials in interfacing with the general public and City officials. Specifically, abusive language and/or profanity is unacceptable and will not be tolerated, and nothing less than a professional demeanor will be expected. Disciplinary action by the City may include, but not be limited to, suspension of violators from City and Third Party Facilities for a term at the discretion of the Parks and Recreation Director or designee.
- 1.14 The Provider shall recruit, train and assign staff and or volunteers to perform all tasks associated with conducting a Special Needs Martial Arts Program.
- 1.15 Although the City shall not control the instructor's techniques, methods, procedures, or sequence of instruction, the Provider will endeavor to comply with the City's and Department's policies and procedures so as not to interfere with their operation, harm or damage the equipment or facilities afforded to Provider for his/her class or to otherwise disrupt the other on-site activities being offered at such public facilities.

- 1.16 Provider must immediately report all incidents that occur within the program to the Athletic Coordinator as well as the Facility Manager.
- 1.17 Provider is expected to follow-up and communicate with participants and patrons with interest and questions within a 48-hour period.
- 1.18 If the Provider will be providing Services directly with minor children without parental supervision, the Provider shall, prior to commencing Services under this Agreement, comply with state laws regarding criminal background screening in accordance with Chapter 435, Florida Statutes, Level I screening standards. The City will furnish the Provider with a background release form (**Exhibit "B"**) for all the provider's counselors, coaches, volunteers, instructors, employees or any individual that will be in the presence of a child. A Consent and Release Form to conduct a criminal background must be executed by any of Provider's employees or any individual who will come in contact with a child at the City through Provider or at Provider's direction, authorizing the City to conduct an inquiry. The result of the inquiry may be deemed acceptable by the City in its sole and complete discretion. The Provider agrees that they shall be solely responsible for all costs and/or expenses associated with conducting background screenings. *If the Provider has recently had a background screening conducted by another agency (Ex: Department of Children & Families), the City, at its sole discretion, may accept that background screening and waive the requirement of a new background screening.* Provider and its employees must also execute a Waiver of Release and Liability (**Exhibit "C"**).
- 1.19 The Provider shall notify the City if they choose to use a Background screening company associated with the designated league. The Provider shall submit to the City copies of background clearances from the company used to conduct the background checks for all such individuals involved in the program for review and approval. The background checks shall be conducted by a company approved by the City.
- 1.20 All cleared coaches/volunteers/instructors are required to wear an ID badge at all times which will be provided by the City of Doral. If the coach/volunteer/instructors does not have their ID badge, they will not be allowed on the field until they have it.
- 1.21 The City shall require all participants in the program to sign a Waiver and Release of Liability located on the Registration Form, a copy of which is attached hereto as **Exhibit "C"**.
- 1.22 The Provider agrees that it shall not discriminate against any person because of their race, color, religion, gender, national origin, physical ability or sexual orientation and agrees to abide by all Federal and State laws regarding nondiscrimination.

- 1.23 Provider cannot exceed the agreed upon participant enrollment cap between the City and Provider unless otherwise determined by the City of Doral.
- 1.24 Provider must remain in good standing for each portion of Program Quality Assessment in **Exhibit "E"**.
- 1.25 Provider shall not discriminate against any person in its operation and activities in its use or expenditure of the funds or any portion of the funds provided by this Agreement and shall affirmatively comply with all applicable provisions of the American Disabilities Act ("ADA") in the course of providing any services funded in whole or in part by the City, including Titles I and II of the ADA and all applicable regulations, guidelines, and standards.
- 1.26 Provider's decisions regarding the delivery of services under this Agreement shall be made without regard to or consideration of race, age, religion, color, gender, sexual orientation, national origin, marital status, physical or mental disability, political affiliation, or any other factor which cannot be lawfully or appropriately used as a basis for delivery of service.
- 1.27 The parties agree that activities sanctioned and/or operated by the City shall have first priority for use of said facilities, notwithstanding any other provisions in the agreement.
- 1.28 The Provider shall be knowledgeable, adhere to and enforce all City park rules and regulations as well as any other third-party facilities rules to ensure the safe and proper usage of such facilities.
- 1.29 The Provider shall accept City facilities in 'as-is' condition and shall be responsible for an inspection and/or assessment of the facility conditions. The Provider shall document and report any issues and/or safety concerns to the supervisor on-duty at the facility in a time efficient manner.
- 1.30 The Provider shall not make any permanent or temporary alterations, improvements or additions to City Facilities, or City affiliated facilities without prior written approval from the Parks & Recreation Director or designee. If approved, the provider would be responsible for the cost of any alterations.
- 1.31 The Provider shall remove any temporary alterations, improvements, or additions to City facilities, or City affiliated facilities at the conclusion of the contract term unless noted otherwise in written form by the Parks & Recreation Director or designee.
- 1.32 The City shall be responsible for reasonable maintenance of City Facilities during the term and shall maintain the City Facilities in a safe, clean and neat condition. However, the

Provider shall ensure that all garbage found in the room used for program session, is collected and properly disposed at the conclusion of session.

- 1.33 Provider shall be responsible for any maintenance or repairs resulting from damages caused by Provider or its employees, agents, guests, invitees, participants and spectators.
- 1.34 The Provider shall inspect the premises and equipment offered to him/her for his/her proposed activity and if he or she finds anything wrong with the premises or equipment before each class commences that cannot be corrected immediately by the Department, the class shall be canceled and the matter reported to the Department for correction. If the Provider elects to hold his/her class in the facility provided, it will be presumed that the Provider has inspected the premises and facilities and equipment provided for such class and has accepted same as being safe and suitable for the use intended.
- 1.35 The Provider shall limit registration and play in accordance with available facilities authorized by the City and agrees not to make demands for additional facilities which are not available or do not exist with the City.
- 1.36 The Provider shall not partner with a third partner to offer program services at City/Third Party Facilities without the prior written consent of the City.
- 1.37 The Provider shall be responsible for the storage and maintenance of all league equipment. The City shall approve all equipment stored by the Provider at all City Facilities. The Provider assumes the responsibility for any equipment stored at City/Third Party Facilities. The Provider understands that the City may add or delete space as deemed necessary to guarantee the successful operation of other City programming.
- 1.38 Any supplies or equipment left at the facility will be the responsibility of the Provider. The City will not be responsible for any lost, stolen, or broken equipment or supplies.
- 1.39 The Provider shall provide to the City a copy of the bylaws, rules/ regulations and or constitution that governs the operations of the program.
- 1.40 The Provider shall notify the City of any changes made to any organizational, management, or programming thirty (30) days prior to the implementation of the changes.
- 1.41 Department approval is required for any promotional material, flyers, and posters advertising the program prior to its release. **The Provider shall also comply with the City's Ordinance No. 2006-02 entitled "Littering" in reference to Section #2-Handbills.** The City will assist in advertising and promotion the program including, but not limited to, the City's website, electronic and paper publications, Doral TV, and social media outlets.

- 1.42 The Provider shall monitor and control all program participants, including, but not limited to players, coaches, umpires, volunteers, spectators, guests and invitees while on City property, City associated, and offsite facilities. Adhering to standards of conduct and disciplinary penalties and/or action as may be necessary to ensure a safe and amicable environment for participants, spectators, guests, invitees and other patrons.
- 1.43 All materials and equipment needed or pertaining to the above stated program will be provided by the Provider at his/her own cost and expense. However, Provider may require students to obtain certain materials required in the program by providing a list of such materials (with approximate costs) to the participants. If Provider makes such materials available to participants, they must be sold at Provider's cost. All equipment provided by the Provider shall be used in strict accordance with equipment manufacturer's instructions and in accordance with all applicable laws.
- 1.44 The sales or advertisement of merchandise is restricted to those materials utilized in and for the class. Fundraising activities conducted by the Provider must be approved by the City in advanced. The Provider shall obtain the City's approval of such merchandise prior to its distribution and advertisement or sale.

## **Section 2- Revenue/ Compensation**

- 2.0 The fee charged to each participant will be described as in the Program Request Form for such class for residents of Doral and 20% more for non-residents of Doral. The entire balance of this surcharge for non-residents shall be retained by the City. Provider may not charge more than the approved rate listed in the Pricing Sheet and program request form (**Exhibit "D"**). Any changes in pricing, discounts and/or payment processes or payment options must be approved by the City prior to implementation.
- 2.1 The Provider shall be compensated in the following manner:

In consideration of the releases and indemnities contained herein and of the Provider's Services in connection with the classes, programs, and activities, described herein, the Provider shall be paid 70% of the fees paid by participants (includes, but not limited to, registration fees, instructional fees and clinic fees) and the exclusive of the non-resident surcharge which will be retained by the City . On behalf of the City the Provider will collect all fees from the participants retain its compensation and transfer the remainder to the City in the form of a check made payable to: *City of Doral*. Payment to the City must be made within fourteen (14) calendar days after the end of each season and/or session. Failure to make timely payments to the City is a breach of this agreement which may be cured by the Provider paying the fees owed plus an additional \$750 late fee on payments not received within fourteen (14) days after the end of each season/session and an additional \$750 late fee on payments not received within thirty (30) days after the end of

each season/session. It is the responsibility of the Provider to pay all applicable local, state, and federal taxes associated with this Agreement, and to acquire and pay for all necessary permits, licenses, and insurance required for the execution of this Agreement.

- 2.2 Provider must submit payout form displayed in “**Exhibit F**”, registration forms, reports and rosters to Program Coordinator each month along with the payment each month.
- 2.3 The Provider warrants to City that it is not insolvent, it is not in bankruptcy proceedings or receivership, nor is it engaged in or threatened with any litigation or other legal or administrative proceedings or investigations of any kind which would have an adverse effect on its ability to perform its obligations under this Agreement.
- 2.4 The Provider agrees it will operate in accordance with the operating budget approved by the City and be solely responsible for all costs and/or expenses associated with, or as a result of its operation under this Agreement including but not limited to uniforms, equipment, officials, marketing tools, tournament fees, permits, certifications, etc.

### **Section 3- Evaluation**

- 3.1 There will be Quality Assessments every three months. These Assessments will evaluate the quality of the program, how enjoyable it is for the participants, and how efficiently the program is being run by the provider.
  - Aug-Nov will be received in Dec
  - March-June will be received in June
  - Final review and Total points Aug-June will be received in July
- 3.2 The Quality Assessments will be broken down into two categories: Program Assessment Portion and Provider Assessment Portion.

#### **Program Assessment Portion**

- Registrants – Maximum 5 points each month
  - 80% or more to capacity and at least 80% of those registered being Doral City residents will result in the maximum 5 points that month. 70% or more to capacity and at least 70% of those registered being Doral City residents will result in 4 points that month. 60% or more to capacity and at least 60% of those registered being Doral City residents will result in 3 points that month. 50% or more to capacity and at least 50% of those registered being Doral City residents will result in 2 points that month. 50% or less to capacity and/or less than 50% of those registered being Doral City residents will result in 1 point that month.
- Surveys



- All participants will receive a survey from Survey Monkey. Program must receive 90% overall participants to be satisfied with program for full allotted points. 4 points for 85%, 4 points for 80%, 2 points for 75% and 0 points if there is less than 70% satisfied.

Provider Assessment Portion

- Payments on time each month – Maximum 5 points each month
  - Payment in full requires full payment by the 14<sup>th</sup> day after the end of season, including copy of roster, date of payments and amount paid (and including 20% non-resident fee). The report(s) will include this information along with the amount due to the City. If the report(s) is missing information or the payment is not received in full and on time it is considered late. If anything is missing – There will be along with a \$750 late fee, 2 points will be deducted from the possible 5 points. If the full payment and/or report(s) are not submitted by the end of the 30<sup>th</sup> Day after the end of season, an additional \$750 late fee will be assessed and 1 point will be awarded.
  
- Spot Checks – Maximum 5 points each month
  - Program Coordinator and staff will conduct random spot checks to assess the quality of the program. If coaches are not wearing their required ID badges, practices are not starting and ending on time or there are conduct issues these would result in missing points each month. These will be assessed at the Athletic Coordinator’s discretion and the program will be notified of their points each month.

Monthly Points for Quality Assessment:

Full payment and correct reports	
5 points	14 days
3 points	14-30 days
1 point	30 or more days

Registrants - capacity and residents	
5 points	<80% and <80% res
4 points	<70% and <70% res
3 points	<60% and <60% res
2 points	<50% and <50% res
1 point	>50% or >50% res

Spot Checks - Badges, Conduct, Time	
-------------------------------------	--

5 points	no issues
4 points	1 issue
3 points	2 issues
2 points	2 issue
1 point	3 issues or more

Quarterly Survey	
15 points	90% satisfied
12 points	85%
9 points	80%
6 points	75%
0 points	70% or less

Maximum 15 total points can be assessed each month, plus an additional 15 points at the end of the quarter for the quarterly survey. The provider will receive 3 Quarterly Reviews throughout the year as well as an Annual Review.

Standing for Registrants and Survey (20 possible points per Quarter) – Program Assessment

- 27-30 points – Excellent Standing
- 24-26 points – Good Standing
- 0-23 – Poor Standing

Standing for Payment and Spot Checks (30 possible points per Quarter) – Provider Assessment

- 27-30 points – Excellent Standing
- 24-26 points – Good Standing
- 0-23 – Poor Standing

Provider must remain in a minimum of Good Standing in both Assessments.



EXHIBIT "B"

# Parks and Recreation BACKGROUND CHECK RELEASE FORM

VOLUNTEER       CONTRACTUAL       EMPLOYEE

BY SIGNING THIS FORM, I AUTHORIZE THE CITY OF DORAL TO CONDUCT A CRIMINAL BACKGROUND CHECK UNDER THE CITY OF DORAL'S VOLUNTEER/EMPLOYMENT POLICY. I UNDERSTAND THAT SOUTHEASTERN SECURITY CONSULTANTS, INC., HAS BEEN SOLICITED BY THE CITY OF DORAL TO CONDUCT CRIMINAL BACKGROUND CHECKS FOR ALL CITY EMPLOYEES/VOLUNTEERS.

I ALSO UNDERSTAND THAT THE RESULT OF THE BACKGROUND CHECK WILL BE CONSIDERED, ALONG WITH ALL OTHER INFORMATION SUBMITTED, IN MAKING A DECISION REGARDING MY SUITABILITY AS AN EMPLOYEE/VOLUNTEER FOR THE CITY OF DORAL.

### NOTICE OF COLLECTION OF SOCIAL SECURITY NUMBER

Please be advised that, consistent with Section 119.071(5), Florida Statutes, the City of Doral collects social security numbers on its employment and volunteer applications. The purpose and need for the collection of social security numbers is to conduct a criminal background and credit history check, if applicable, on the candidate applying as an employee or volunteer. The social security numbers collected by the City of Doral will not be used for any purpose other than to conduct a criminal background and credit history check. The City of Doral will not release the social security number to any individual or agency unless required by court order or state law.

## CURRENT PERSONAL DATA


NAME Francisco Santander

SOCIAL SECURITY NUMBER 078-78-2433      DATE OF BIRTH March 4, 1964

PRESENT ADDRESS 11267 NW 58 TERRACE

CITY DORAL      STATE FLORIDA      ZIP 33178

I HEREBY CONSENT TO A CRIMINAL BACKGROUND CHECK AND RELEASE THE CITY OF DORAL, ITS AFFILIATES, ASSOCIATES, AND ANYONE ACTING ON THEIR BEHALF FROM ANY AND ALL CLAIMS OR LIABILITIES OF ANY NATURE ARISING FROM OR RELATED TO THE PREPARATION OF THE INFORMATION CONTAINED IN THE CRIMINAL BACKGROUND REPORT AND THE DISCLOSURE OF SUCH INFORMATION FOR EMPLOYMENT/VOLUNTEER PURPOSES.

  
SIGNATURE

February 28, 2019  
DATE

Office Use Only: The above applicant's information is to be used to conduct the following background screening:  
 Criminal background records/information

National Sex Offender Registry check

Credit History Check

Signature of person making this request \_\_\_\_\_ Title \_\_\_\_\_

5-13-2009

EXHIBIT "C"

CITY OF DORAL

WAIVER AND RELEASE OF LIABILITY/MEDICAL TREATMENT CONSENT

TO THE CITY OF DORAL: in consideration of the opportunity afforded to me or my minor child/ward to participate in the activity described in the Registration Form at:

Morgan Levy Park, 5300 NW 102<sup>nd</sup> Avenue / Doral Meadow Park, 11555 NW 58<sup>th</sup> Street

Doral Legacy Park, 11400 NW 82 Street / Doral Central Park 3000 NW 87<sup>th</sup> Avenue.

(Name and Address of Facility)

I, the undersigned, on behalf of myself or my child/ward named in the Registration form, do freely agree to make the following contractual representations and agreements.

I, on behalf of myself or my child/ward named in the Registration Form, acknowledge and understand that participation in the activity involves the risk of serious injury, including permanent disability and/or death and severe social and economic losses.

I, on behalf of myself or my child/ward named in the Registration Form, do hereby knowingly, freely, and voluntarily assume all liability for any damage or injury which may occur as a result of me or my child/ward's participation in such activity and will indemnify and hold harmless from any and all liability to release, waive, discharge, and covenant not to sue the City of Doral, its officers, agents, employees, and volunteers from any and all liability or claims which may be sustained by me, my minor child/ward, or a third party directly or indirectly in conjunction with, or arising out of participation in the activity described herein, whether caused in whole or in part by the negligence of the City of Doral or otherwise.

I, on behalf of myself or my child/ward named in the Registration Form, grant permission to transport the participant to and from events, activities, programs, etc. when required and hold harmless those who transport.

I, on behalf of myself or my child/ward named in the Registration Form, also agree to allow transportation of the participant to the nearest physician or hospital for medical treatment and agree for immediate first aid to injured person when deemed necessary.

PHOTO RELEASE

I give permission for any photograph, video tape, or any other form of audio visual record of myself or my child's participation with the City of Doral Parks and Recreation Department to be used by the City of Doral for publicity purposes.

**I, on behalf of myself or my child/ward, have read the above provision, fully understand its terms, and understand that I, on behalf of myself or my child/ward, have given up substantial rights by signing this waiver and I acknowledge that I signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of any and all liability to the greatest extent**

**allowed by law and I agree that, if any portion of this Registration Form is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.**

Name of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

EXHIBIT "D"

PROGRAM REQUEST FORM

*Individuals interested in proposing their programs and services must complete and return this form attached to the Request for Proposal. All program fees are subject to military discounts of 25% per child (50% per sibling) off of the registration cost. Discount only applies to Doral residents and with proper military ID. This information will be used for consideration of program proposals. Use one form per program.*

Name of Program: DEW's Wellness & Martial Arts Program for the Special Needs community

Participant Ages: from Seven (7) years old to Ninety-seven (97) years young

Day(s) of the week program is offered: Mondays and Fridays

Time of Program: from Refer to attached schedule to \_\_\_\_\_

Program Dates: from Refer to attached schedule to \_\_\_\_\_

Program Fee: City of Doral RESIDENTS: \$110.00 per session

Program Enrollment: Minimum Five (5) participant Maximum TBD by City/FD code

Materials to be supplied by participants: \_\_\_\_\_

Materials to be supplied by Provider: Participant Welcome documents kit , availability of uniforms belts, gear bag, etc. at Provider's cost

Materials to be supplied by the City: Space, Oversight, Permissions and Schedule

Additional Program Requirements: Participants shall take part in the W&MA Program dressed in a

proper karate gi, belt. These will be made available to participants at the Provider's cost.

Point of Contact: *Francisco Santander, Executive Director*

Address: *11267 NW 58 terrace*

City/State/Zip Code: *Doral, FL 33178*

Phone Number: *+1 (786) 879-5521* Fax: \_\_\_\_\_

E-mail: *INFO@UERUNESUDOJO.ORG*







There are Quality Assessments every three months. These Assessments will evaluate the quality of the program, how enjoyable it is for the participants, and how efficiently the program is being run by the provider.

- Aug-Nov will be received in Dec
- Dec-Feb will be received in March
- March-May will be received in June
- Final review and Total points Aug-May will be received in June

The Quality Assessments will be broken down into two categories: Program Assessment Portion and Provider Assessment Portion.

#### Program Assessment Portion

- Registrants – Maximum 5 points each month
  - 80% or more to capacity and at least 80% of those registered being Doral City residents will result in the maximum 5 points that month. 70% or more to capacity and at least 70% of those registered being Doral City residents will result in 4 points that month. 60% or more to capacity and at least 60% of those registered being Doral City residents will result in 3 points that month. 50% or more to capacity and at least 50% of those registered being Doral City residents will result in 2 points that month. 50% or less to capacity and/or less than 50% of those registered being Doral City residents will result in 1 point that month.
- Surveys
  - All participants will receive a survey from Survey Monkey. Program must receive 90% overall participants to be satisfied with program for full allotted points. 4 points for 85%, 4 points for 80%, 2 points for 75% and 0 points if there is less than 70% satisfied.

#### Provider Assessment Portion

- Payments on time each month – Maximum 5 points each month
  - Payment in full requires full payment by the 14<sup>th</sup> of the following month and including copy of roster, date of payments and amount paid (and including 20% non-resident fee). The report(s) will include this information along with the amount due to the City. If the report(s) is missing information or the payment is

not received and in full on time it is considered late. If anything is missing – There will be along with a \$750 late fee, 2 points will be deducted from the possible 5 points for each month's payment. If the full payment and report(s) are not submitted by the end of the month an additional \$750 late fee will be assessed and an additional 2 points will be deducted from the possible 3 points remaining points of the original 5. If the payment is made after the conclusion of that month only 1 point will be assessed for the payment points that month.

- Spot Checks – Maximum 5 points each month
  - Program Coordinator and staff will conduct random spot checks to assess the quality of the program. If coaches are not wearing their required ID badges, practices are not starting and ending on time or there are conduct issues these would result in missing points each month. These will be assessed at the Program Coordinator's discretion and the program will be notified of their points each month.



## Soccer Program Provider Quarterly Assessment

Provider D.E.W., Inc.  
 Date \_\_\_\_\_  
 Session \_\_\_\_\_

### Program Assessment Portion

#### Criteria:

Registrants - Capacity and residents	
5 points	<80% and <80% Res
4 points	<70% and <70% Res
3 points	<60% and <60% Res
2 points	<50% and <50% Res
1 point	>50% or >50% Res

Quarterly Survey	
15 points	90% Satisfied
12 points	85% Satisfied
9 points	80% Satisfied
6 points	75% Satisfied
0 points	70% or less Satisfied

#### Scores:

Total Capacity Allowed \_\_\_\_\_

	Registered	% of Cap	% Resident	Points
1st Month				
2nd Month				
3rd Month				

Satisfaction Survey	
% Satisfied	
Points	

1st Monthly points \_\_\_\_\_

2nd Monthly points \_\_\_\_\_

3rd Monthly points \_\_\_\_\_

Quarterly Survey \_\_\_\_\_

Total Points for Program Assessment Portion \_\_\_\_\_

#### Notes:

City:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Provider:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## Provider Assessment Portion

### Criteria:

Full payment and correct reports	
5 points	14th of month
3 points	End of month
1 point	Next month

Spot Checks - Badges, Conduct, Time	
5 points	no issues
4 points	1 issue
3 points	2 issues
2 points	2 issue
1 point	3 issues or more

### Scores:

	Date rec.	points
1st Month		
2nd Month		
3rd Month		

	Offenses	points
1st Month		
2nd Month		
3rd Month		

Notation of Issues \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## Standings

### Criteria:

Standing for Each  
Assessment

points	standing
27-30	Excellent
24-25	Good
0-23	Poor

Points received for Program Assessment	
Standing achieved for Program Assessment	

Points received for Provider Assessment	
Standing achieved for Provider Assessment	

Coordinator Signature \_\_\_\_\_

Provider Signature \_\_\_\_\_

Program: _____ Days: _____ Begins: _____ Start Time: _____ (R) Fee: _____ Monthly Fee: _____	Ends: _____ End Time: _____ (NR) Fee: _____ Monthly Fee: _____	Instructor: _____ Address: _____ Facility: _____ Deposit Dates: _____	_____ _____ _____ _____ _____
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	Last	First	Fee	Non-Res 20% Sur	%City	% Ins		Last	First	Fee	Non-Res 20% Sur	%City	% Ins	
1							22							
2							23							
3							24							
4							25							
5							26							
6							27							
7							28							
8							29							
9							30							
10							31							
11							32							
12							33							
13							34							
14							35							
15							36							
16							37							
17							38							
18							39							
19							40							
20							41							
21							42							
<b>TOTALS</b>			\$0.00	\$0.00	\$0.00	\$0.00				\$ -	\$0.00	\$0.00	\$0.00	

Total Registered: \_\_\_\_\_  
 Total Residents: \_\_\_\_\_  
 Total Non-Residents: \_\_\_\_\_  
 Grand Total Collected: \_\_\_\_\_ \$0.00

Amount to City (%) \$0.00  
 Amount to Instructor (%) \$0.00

Date Submitted: \_\_\_\_\_

Received By: \_\_\_\_\_

**\*\*\*Highlighted names identify Split Payment**  
**\*\* Highlighted names identify non-resident**  
**\* Highlighted names identify Family Discount**



**EXHIBIT "G"**

**INSURANCE REQUIREMENTS- AGREEMENTS FOR OUTSIDE INSTRUCTORS**

- I. **Commercial General Liability**
- A. Limits of Liability
- |   |             |
|---|-------------|
| Bodily Injury & Property Damage Liability   |             |
| Each Occurrence                             | \$1,000,000 |
| Policy Aggregate                            | \$1,000,000 |
| Personal & Advertising Injury               | \$1,000,000 |
| Products & Comp. Operations (If Applicable) | \$1,000,000 |
| Sexual Abuse & Molestation                  | \$100,000   |
- B. Endorsements Required:  
City of Doral listed as an Additional Insured  
8401 NW 53<sup>rd</sup> Terrace, Doral, FL 33166
- Contingent Liability  
Premises and Operations Liability
- II. **Workers Compensation (Coverage A)**  
Statutory limits as required - State of Florida
- Employer's Liability (Coverage B)**  
\$100,000 for bodily injury caused by an accident, each accident  
\$100,000 for bodily injury caused by disease, each employee  
\$500,000 for bodily injury caused by disease, policy limit
- III. **Professional Liability/Error's & Omissions (If Applicable)**
- A. Limits of Liability
- |                  |             |
|------------------|-------------|
| Each Claim       | \$1,000,000 |
| Policy Aggregate | \$1,000,000 |
- "Retro Date" coverage included

**All above coverage must remain in force and Certificate of Insurance on file with City without interruption for the duration of this agreement.**

**Policies shall provide the City of Doral written notice of cancellation or material change from the insurer in accordance to policy provisions. If coverage will not be replaced within 10 days with no lapse in coverage, instructor is required to notify City directly.**

**All insurance will be provided by companies authorized to do business in the State of Florida. Companies must be AM Best rated no less than "A-", "Class VI".**

**Requirements herein are minimums. Coverages, limits, policies and certificates of insurance are subject to review, verification, and amendment by Risk Management.**



Dojo of Exceptional Wellness, Inc.

# Wellness & Martial Arts PROGRAM Description

Prepared for: CITY of DORAL  
George Vega, Special Needs Coordinator  
Erin Weislow, Recreation Administrator

Prepared by: Francisco Santander, Executive Director/CEO



May 29, 2018

Proposal number: DEW-18N002



## SUMMARY

### Objective

The Dojo of Exceptional Wellness, Inc.'s (**DEW**) *Wellness & Martial Arts Program* aims to provide for the Special Needs population of all ages a setting to learn martial arts in the individual pursuit of Wellness, Education and Improvement of their Quality of Life through the many transformative benefits of becoming a practitioner of Martial Arts.

### Goals

**DEW** will promote a peaceful and welcoming environment for personal empowerment, self-expression and inner strength through the instruction of Martial Arts to the Special Needs population. We will impart martial arts instruction to the Special Needs Community that can transcend to their daily routines, significantly improving their quality of life.

## TRADITIONAL MARTIAL ARTS in today's MODERN AGE

### Solution

The **Dojo of Exceptional Wellness, Inc. (DEW)** *Wellness and Martial Arts Program (W&MA)* is designed to share the harmony and peace that martial arts can bring to its students, along with the many benefits to the mind, body and soul of its practitioners which include self-confidence, self-empowerment, inner strength, concentration, balance, peace and more.

**DEW** provides martial arts instruction to adults and children at locations: in public schools, community centers and City parks. This year-round program is designed to provide lessons to the special needs population in Miami-Dade County, using karate-do to improve individual achievements, social skills, parental involvement and, ultimately, the overall quality of their lives.

**DEW** is a nonprofit organization that promotes traditional Okinawan karate-do and kobudo, as handed down from the teachings of the Founder of the Matsubayashi Shorin-ryu style, O'Sensei Shoshin Nagamine, to his student, 10th degree Black Belt, Master Sensei Eihachi Ota, Hanshi. Thereby, to the **DEW** in the Florida chapter of Ota





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## DOJO OF EXCEPTIONAL WELLNESS, INC.

Sensei's organization: the Shorin-ryu Karate-do & Kobudo Association (**S.K.K.A.**) the **DEW**'s style organization.

**DEW** provides Matsubayashi Shorin-ryu karate-do and kobudo instruction based on Ota Hanshi's training and guidance. Self-defense techniques are thus and elsewhere derived. In coordination with **SKKA** associated dojos in Miami and the state of Florida, seminars and other events take place year round.

As students train they develop their natural skills and abilities, as well as discover new ones. As students master these abilities they go from being beginners to intermediates and finally to advanced students.

### Instructor

Sensei Francisco Santander began his martial arts training in Gosoku-ryu/Shotokan Japanese karate-do with the International Karate Association (**IKA**) in Venezuela under sensei Edgardo Karam and Federico Lante and in the USA under Master Sensei Tak Kubota, during the mid-1980's. Due to work relocation in the early 1990's, sensei Santander had opportunity to train in Japanese Aikido during his years in the Netherlands Antilles, under sensei Frank Wong and, later, under sensei WeeWow Dumlao at the Miami Aikikai. Sensei Francisco pursues Martial Arts with passion, enthusiasm and curiosity.

Santander sensei holds the rank of Godan (5th degree black belt) in Matsubayashi Shorin-ryu karate-do and Okinawan kobudo. He is an avid traveler; having traveled to the Middle East, Africa, Europe, South America and throughout the USA to adorn his current passport.

### Project Outline

Impart martial arts instruction in the pursuit of improvements to the quality of lives through greater inner strength, self-confidence, self-empowerment to the *City of Doral's Special Needs population, based out of the Legacy Park located at 11400 NW 82 Street, Doral, FL 33178*, during multiple weekly one-hour sessions.

**Beginners:** During the first months students will be taught basic kicks, blocks, punches, forms (katas) and one step drills. They will start at a white belt at this level and will be given the opportunity to test for the next belt level after three months have been completed. .



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**Intermediate:** Our intermediate level students wear yellow, orange, blue, green and purple belts. They learn all basic karate forms (katas), drills, focus training and self-defense techniques to reach a very profound level of execution, as well as self-confidence and self control while increasing their awareness of karate training. Duration at this level will depend on the student's ability to learn, to adapt, and to execute all techniques to a higher level.

**Advanced:** Brown and black belts. Students at these levels will have mastered all basic forms (katas), drills, focus training, multiple-attacker self defense, Kata bunkai (i.e. application of techniques), basic techniques to a higher level of proficiency. They have begun their path to a higher (philosophical) level of karateka. Advancement at these levels will be at the instructor's discretion and authorization.

The deep understanding and application of body mechanics, further developed by Hanshi Ota during his lifelong experiences as a martial artist, enhances the benefits derived from the execution of karate-do techniques.

Our school is founded on this philosophy, as emphasized by Master Sensei Ota's mission statement: "... to introduce unique training exercises to help practitioners develop their skills and increase their knowledge of the art." This empowers all of us to focus in karate as we would in our efforts in any enterprise we wish to pursue in our personal lives.

One of the most important goals in our school is to improve the character and intrinsic quality of life, health and spiritual well being of the practitioners of this ancient martial art. Among the many exercises we practice, **DEW** emphasizes kata, also known as forms, as a central discipline to develop skill, understanding and the ability to successfully and effectively perform the techniques within this traditional style of Okinawan Shorin-ryu Karate-do.

Kindly direct any comments or questions to [info@uerunesudojo.org](mailto:info@uerunesudojo.org) in order to clarify or expand on any particular topic in inquiry.

Sincerely yours,

sensei Francisco Santander  
Executive Director





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
02/21/2019

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).

<b>PRODUCER</b> All Insurance Services 1548 W. 37 St. Hialeah, FL 33012 Phone (305) 822-4472 Fax (305) 556-4354		<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): (305) 822-4472 FAX (A/C, No): (305) 556-4354 E-MAIL ADDRESS: jfernandez@aisrv.com	
<b>INSURED</b> DOJO OF EXECPTIONAL WELLNESS, INC 11267 NW 58 TERR DORAL FL 33178		<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A: UNITED STATES FIRE INSURANCE INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

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 EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDLSUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER	Y	SRPGAPML-101-0718	02/23/2019	02/23/2020	EACH OCCURRENCE \$ 1,000,000.00 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000.00 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000.00 GENERAL AGGREGATE \$ 2,000,000.00 PRODUCTS - COMP/OP AGG \$ 2,000,000.00 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/>					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	SEXUAL ABUSE & MOLESTATION		SRPGAPML-101-0718	02/23/2019	02/23/2020	EACH OCURRENCE \$100000.00 GENERAL AGGREGA \$100000.00

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
THE CERTIFICATE HOLDER IS LISTED AS ADDITIONAL INSURED.

<b>CERTIFICATE HOLDER</b> CITY OF DORAL 8401 NW 53rd TERRACE DORAL, FL 33166	<b>CANCELLATION</b> 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 <i>Jfernandez</i>
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Doral Legacy Park  
Program Schedule  
Winter 2019



### Dance Room

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
10:00a-10:50a	First Steps Dance 4:30pm-5:15pm	Chair Yoga 10:00am-10:50am	First Steps Dance 4:30pm-5:15pm	Chair Yoga 10:00am-10:50am	
11:00a-11:50a	Dance Minis 5:15pm-6:00pm	Feel the Beat 5:15pm-6:15pm	Dance Minis 5:15pm-6:00pm	11:00a-11:50a	
04:00p - 05:50p	Dance Juniors 6:00pm-6:45pm	Feel the Beat 6:15pm-6:45pm	Dance Juniors 6:00pm-6:45pm	12:00p-12:50p	
Yoga 7:00pm-8:00pm		Yoga 7:00pm-8:00pm			

### Multipurpose Room

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
				Just You & Me 10:30am-11:30am	
	Karate (Youth) 6:00pm-7:00pm	Feel the Beat 6:45pm-7:15pm	Karate (Youth) 6:00pm-7:00pm		
	Karate (Adult) 7:00pm-8:00pm		Karate (Adult) 7:00pm-8:00pm		

NOTES:

\*Seminar and Luncheon will occur once a Month in Senior Room, could be scheduled on either a Tuesday or Thursday

\*Bingo Night will occur once a month in the EVENT HALL.

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Doral Legacy Park  
Program Schedule

Winter 2019

**Art Room**



Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
CE -Age (6-9) Design 6:00pm-7:00pm	CE -Age (6-9) Design 6:00pm-7:00pm	<b>Chess For Kids 5:30pm-6:30pm</b>	Crafty Art 6:00pm-7:00pm		CE -Age (4-5) PK 6:00pm-7:00pm
CE -Age (10-13) Design 6:00pm-7:00pm	CE -Age (10-13) Design 7:00pm-8:00pm				

**Senior Room**

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Silver Club Social Hour 10:00am-2:00pm		Montly Birthday 11:00am-1:00pm	Seminar and Luncheon 12:00pm-2:00pm*		
	SC Art Class 4pm-6pm		SC Art Class 4pm-6pm		
			Social Hour 6:00pm-8:30pm		

NOTES:

\*Seminar and Luncheon will occur once a Month in Senior Room, could be scheduled on either a Tuesday or Thursday

\*Bingo Night will occur once a month in the EVENT HALL.

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