cid:image001.png@01D2883E.3BF9EB30

|  |
| --- |
| **Optimist International Canada /***Insurance Program* |

# Request for Insurance certificate

**⌦** *Name of Club (including number)*

*Name of Club*:

|  |
| --- |
| *Member requesting certificate:* |

*Mailing address:*

|  |
| --- |
| *Tel* : (     )      -      *Fax* : (     )      - |
| E-mail: |

*Name of event :*

|  |
| --- |
|  |

*With regards to this event, does your Club act as:*

🠪 *Sponsor* :  Yes  No 🠪 *Participant* :  Yes  No

🠪 *Organizer* :  Yes  No

*Location of the event* :

|  |
| --- |
|  |

*Date of the event* :

|  |
| --- |
|  |

**⌦ *Party requesting proof of Liability coverage :***

*Name of Party* :

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| |  | | --- | |  |   *Contact*:   |  | | --- | |  |   *Mailing address*:   |  | | --- | |  |   *Fax* : (     )      -      E-mail :   |  | | --- | |  | |

⌦ *Is the Party requesting to be named as an Additional Insured ?*

Yes  No

*Does the event involve:* 1) *Events with use of boats, aircrafts or vehicles*:  Yes  No

2) *Lease, use or ownership of fireworks :*  Yes  No