



## Sponsored/Endorsed Events Request for Certificate of Insurance

Event Name: \_\_\_\_\_

Event Dates: \_\_\_\_\_ Event Venue: \_\_\_\_\_

Venue Address : \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

### Documents Required Per Venue Contract (check all that apply):

Please attach a copy of the contract page that addresses insurance requirements

Proof of Liability Coverage Limits Required: \$ \_\_\_\_\_ Single Occurrence  
\$ \_\_\_\_\_ Aggregate

Additional Named Insured (there is a charge of \$35 for each additional name added to the certificate)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Other (please specify): \_\_\_\_\_

Date by which documents are required: \_\_\_\_\_

### Please send documents to:

Primary Event Contact Listed above

E-Mail

Fax

Venue

E-Mail \_\_\_\_\_  Fax: \_\_\_\_\_

Please return this completed form to Vickie Iverson at [viverson@handbellmusicians.org](mailto:viverson@handbellmusicians.org) or fax to Vickie's attention at 937-438-0085. Allow a minimum of 2 weeks for delivery of documents.