Sydney Landing, 2003A-3713 Kensington Ave, Burnaby, BC V5B 0A7 $\,$

Phone: 604-477-1488 | info@bcschoolsports.ca | www.bcschoolsports.ca

Proof of Insurance Request Form

Submission Details: Please type directly into the form and complete all required fields, save and email to info@bcschoolsports.ca with the subject: Proof of Insurance Request.

IMPORTANT NOTES

THERE MAY BE AN ADDITIONAL COST FOR INSURANCE LIABILITY REQUESTS IN EXCESS OF \$5,000,000.

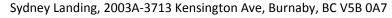
It is the responsibility of the Sport Commission to ensure requests for insurance, if required for the facilities for zone qualifiers and championship play, are submitted at least seven (7) days prior to the date of the event.

Contact Information			
Name			
Email			
Phone			
Commission and Event Information			
Sport Commission's Full Legal Name			
Level of Play			
Zone			
Date(s) of Event			
Estimated Number of Athletes Attending			
Estimated Number of Coaches Attending			
Estimated Number of Spectators Attending			

Facility Agreement Information

This should all be information directly from your facility agreement. Make sure all fields are exactly as they are in the facility agreement.

facility agreement.				
l	egal Name that is Requesting Proof of Insurance			
L	and/Facility to be Insured (used): Name of Land/Facility			
	Address			
	City, Prov, Postal Code			
	Dollar Amount Required			
	Type of Insurance Certificate Required	Notified of Coverage	added as Additional Insured	





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Facility Agreement Information (cont'd)

Contract Number (if provided)

Copy for Facility yes no

Organization Name

Attention/Contact Name

Email

If more than one copy is required, please leave details in Additional Information.

Additional Information

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