



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.

Legal Name that is Requesting Proof of Insurance
Land/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		
<i>If more than one copy is required, please leave details in Additional Information.</i>		

Additional Information

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