

This form to be used for requests for Certificates of Insurance Completed forms to be remitted to Katelyn Richardson

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## **IT IS REQUIRED THAT REQUEST BE SUBMITTED 14 DAYS PRIOR TO EVENT**

EVENTS WITH ALCOHOL: Liquor Liability Questionnaire must be completed and remitted with certificate request form. Liquor Liability Questionnaire can be found at www.norwichinsurance.com under Programs

EVENTS WITH EXCLUDED ACTIVITIES: Certificates of Insurance from Vendors providing excluded activites must be remitted with this form, showing the Rotary Club as additional insured. Refer to policy documents for exclusions.

| ROTARY DISTRICT #   |   |
|---|---|
| THIS IS FOR THE ROTARY CLUB OF                                |   |
| CONTACT NAME:   |   |
| MAILING ADDRESS:  |   |
| TELEPHONE #   | FAX #   |
| EMAIL ADDRESS:  |   |
| DETAILS OF THE EVENT  |   |
| DATES:  |   |
| NAME OF THE EVENT:  |   |
| DESCRIBE OPERATIONS:  |   |
| DOES THE EVENT INCLUDE THE SERVING OF ALCOHO                  | OL? YES NO                                      |
| WHERE IS THE EVENT?   |   |
| WHO IS THE CERTIFICATE HOLDER (WHO has asked I NAME: ADDRESS: |   |
| PHONE #   | FAX #   |
| CONTACT EMAIL:  |   |
| IS THERE ANYONE WHO HAS ASKED TO BE SHOWN A                   | AS AN ADDITIONAL INSURED FOR THIS EVENT? IF SO, |
| NAME:   |   |
| ADDRESS:  |   |
| PHONE #   | FAX #   |
| CONTACT EMAIL:  |   |
|   |   |