

CERTIFICATE OF INSURANCE REQUEST



Event:	Event Date(s):
Chapter Name:	Event Time(s):
Location of Event:	
Address:	
City/State/Zip:	
Food or Beverage to (circle one): Served or Sold	
If Sold what Kind:	
Number of DeMolay:	Number of Advisors:
Circle one: Certificate Holder	Named Additional Insured
<p><i>Certificate Holder is simply proof of insurance, where as Additional Insured status gives coverage and rights under your sub-contractors policy.</i></p> <p><i>The venue needs to tell you what their needs are when requesting the certificate.</i></p>	
Name:	Name:
Address:	Address:
Addl Address:	Addl Address:
City, State, Zip:	City, State, Zip:
Send Completed Certificate by (circle one):	Email Certificate Mail Certificate
Email to:	
Mail to:	
Address:	
City, State, Zip:	
Special Instructions:	
Executive Officer Approval:	Jurisdiction: