SafeChurch[®] Certificate of Insurance Request Form

It is a policy of this church to require all contractors, service companies and outside groups using the church facilities to provide proof of general liability and workers' compensation insurance.

The appropriate form should be attached to this sheet, prior to any work or event occurring, naming this church as an additional insured.

Name of contractor/organization: Address: Contact person:______Title:_____ Phone number: _____ Description of activity/job/event: Approximately how many people will be involved in the activity/job/event? What types of activities will be included in this event (e.g., dancing, construction, climbing ladders, use of power tools, meetings, etc.)? Amount of coverage: _____ Name of insurer: _____ Phone number of insurer:______Policy expiration date: _____ Limits of Liability: Do you have an umbrella policy? Yes No Are all workers included under your workers' compensation policy? Yes No Is our church/organization named as an "additional insured"? Yes No Date: ____ Signature:

For church use:

I have looked at the attached paperwork and have approved the above named agency/group/business to use the church facility for the purpose described above.

Name:	Date:
Title:	



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