

Arizona Regional Service Committee Inc.
P.O. Box 1351
Phoenix, Arizona 85001

INSURANCE REQUEST FORM

All group and business meetings as well as activities are covered with the current insurance policy except meetings that are held in club houses. Certificates of insurance will be provided upon request of the facilities that require them. There is no need to request a certificate if the facility that you are using is not asking for one. **All of the information requested below must be supplied to order your Certificate of Insurance.**

Information Needed For Certificates of Insurance is:

Name of the event: _____

Dates: _____ **to** _____

Time: Start; _____ **End** _____

The Sponsor: Region _____ **Area** _____ **Group** _____

LOCATION OF THE EVENT:

Name of the facility or Park: _____

Address; Street, City, State, Zip Code _____

Contact Name of Facility: _____

Contact Person: _____

Contact Persons address if other than the place of the event:

Contact Phone Area Code/Number: _____

Contact Fax Number (Include Area Code): _____

Email Address: _____

**PLEASE REQUEST YOUR CERTIFICATES 30 DAYS PRIOR TO THE EVENT.
THIS APPLICATION CAN BE REQUESTED AND SENT VIA EMAIL.**

INSURANCE LIASION

BOD_Insurance@Arizona-NA.org