Minsi Trails Council Certificate of Insurance Request Boy Scouts of America

*Please note there is a minimum two week turn-around for requests required by the BSA National Office.

If the request is less than two weeks, Minsi Trails Council staff will try to accommodate as best as we can. Revisions by the national office may also be required, therefore to ensure a timely issuance, please allow enough time for questions, revisions and responses.

Please remit information to Noreen Davis at Noreen.davis@scouting.org and Carbon Copy your District Executive.

Date of request: District or Committee name: _____ Pack or Troop or Crew: ____ Unit #: ____ Phone: _____ Unit contact: Activity contact: _____ Phone: *Date/time of activity: Type of activity (Please be specific): Requestor information (Name of property owner or location requesting documents from you) Name: _____ Address: Facility of use address (if different): Area of use (Please be specific, ie: parking lot, classroom, gymnasium, kitchen etc.): What is the property owner requesting? (PLEASE CHECK/COMPLETE ALL THAT APPLY.) Section 1 ☐ Proof of Insurance ☐ Certificate of Insurance (COI) ☐ \$1,000,000 Gen. Liability (higher amounts see Sec.2) ☐ Named Additionally Insured: Address: _____ Section 2 - Coverage in excess or in addition to Section 1 ☐ COI with greater than \$1M Gen. Liability: Specify \$: and Requirements: ☐ A minimum per occurrence ☐ Agreement to Indemnify or Hold Harmless ☐ Other (specify): _____ Section 3 Is there an application for use of the facility? ______ if yes, please forward a copy. Is there a fee for use? If this is for a meeting, is this a weekly unit meeting? If yes, will this request be renewed next year? If yes, is the requestor of proof of insurance your charter organization? Is there a written agreement or contract? _____ if yes, please attach a copy of all documents.

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