## THE STANDARD INSURANCE REQUEST MAY TAKE UP TO 5 WORKING DAYS. THE EXTRA INSURANCE REQUEST (OVER 1M) MAY TAKE UP TO 10 DAYS.

\*\* REQUESTS ARE PROCESSED IN THE ORDER IN WHICH THEY ARE RECEIVED \*\*

## REQUEST FOR CERTIFICATE OF INSURANCE

(Please print legibly or type)

PLEASE FILL OUT COMPLETELY			Date:			
<u>TO</u> :	Phone: 610-696-29	er – Trading Post Manager 00 x10 Fax: 610-696-3389 <u>derliter@scouting.org</u>				
FROM:				Chester County Council		
	Requestor					
PHONI	E:	Ext Fax #:	;			
EMAIL	L ADDRESS:					
Unit, Dist	trict or Council Activity?					
Which un	it or district?					
Description	on of activity/event					
Date(s) of	f activity					
		Location of actual event & descript	ion of facilities used:			
	ALL CUB SCOUT D					
certifica Scout	ation through the National Executive Initials:equested: \$				a current training	
	FROM THE	TTACH A COPY OF ANY AGREEMENT, C C CERTIFICATE HOLDER INDICATING TI IS IS NOT INCLUDED THE CERTIFICATE	HEIR INSURANCE REQUIREM	ENTS.		
Certificate	e holder/Organization Rec	questing Certificate (Complete name and addres	ss):			
Has the certificate holder requested to be listed as additional insured?				Yes	☐ No	
Are any fees required for services, use of property, etc?				Yes	☐ No	
		<u> </u>				
If certificate is for a unit activity, is the certificate holder the chartered organization for the			for the unit involved?	Yes	☐ No	
Additiona	al comments:					

Please allow at least 2 weeks for processing of certificates to avoid delays and the possibility of not receiving your certificate in time.