

Certificate of Insurance Request Form

The NCVA provides outstanding insurance for our teams. At **no charge** to you, we will provide you facility insurance coverage for all of your practice sites. This form may be used by junior clubs or adult teams that would like to request a certificate(s) of insurance for a facility. The facility is covered by the insurance company for all club practices and NCVA-sanctioned tournaments. If requesting more than two certificates, please use additional copies of this form. Send this form to the NCVA Office. For additional insurance information please go to www.ncva.com.

Note: This is the **ONLY** form that will be accepted for insurance requests. **Please allow 10 Business Days to receive your certificate of insurance**

How would you like this form sent? This form will be sent to the club contact listed on this form.

Pick One: Email Fax Mail

Region: Northern California

Date: _____ Club Name: _____

Contact: _____ Email: _____

Address: _____ City, State, Zip: _____

Phone: _____ Fax: _____

Certificate Holder: (Facility or District Name) Phone: _____

Name: _____

Address: _____

City, State, Zip: _____

Special Instructions: _____

Facility Use: Practice Scrimmage Clinic Tryout Other: _____

Certificate Holder: (Facility or District Name) Phone: _____

Name: _____

Address: _____

City, State, Zip: _____

Special Instructions: _____

Facility Use: Practice Scrimmage Clinic Tryout Other: _____

Please allow 10 Business Days to receive your certificate of insurance.

Additional insured endorsements WILL take additional time to process.