

Request for Certificate of Insurance

Sask Sport Group Insurance

Name of provincial sport governing body _____

Who is requesting the certificate of insurance? _____

What is the event? _____

Date the event is being held _____

Is there an additional insured requirement? Yes No

If so provide the complete name and address including the postal code:

Where does the certificate need to be sent?

Email address _____

Fax number _____

Contact name _____

Please return signed and completed form to:

Candace Fazakas

Fax: 306.359.0387

Email: candace.fazakas@aon.ca

1000 – 2103 11th Ave., Regina SK. S4P 3Z8