

Certificate of Insurance Request Form

In some situations a volunteer may be asked for a Certificate of Insurance (COI) stating the limits of liability for the council policy or to be listed as an additional insured. This may occur in the following instances:

- Use of a facility (school, church, etc.) for a group meeting, service unit event, etc.
- An event held at a non-council facility, such as a camparound

Policy GSNI-M requires a COI be requested for any program activity, contractual relationship, and/or site

where Girl Scout programs and/or events take place. If the program is considered a specialized

activity, GSNI-M will request to be named as an Additional Insured.

GSNI-M will provide a copy of insurance upon request. If the request involves a charge or fee to

process, the group or service unit will be responsible for these charges.

Procedure For copies of the COI, please complete this form and send it to: GSNIM, Attn: COI Request, 10008

> Dupont Circle Dr. East, Fort Wayne, IN 46825. If you have an agreement or contract, please include with your request. Please allow a minimum of one week to process (one month if there is a

contract or agreement). You may also submit by fax to 855-422-0084 or email to frontdesk@gsnim.org.				
Please mark the reason the COI is	needed:			
☐ Troop/Group meeting place ☐	Trip ☐ Specialize	d Activity	□ Event	
☐ Other				
Please check one:	Date	Date Request was submitted		
☐ Certificate of Insurance ☐ Certificate of Insurance with group listed as an additional insured.				
Name of Organization requesting cer	rtificate:			
Address of Organization requesting certificate:				
Address				
City		State _		. Zip
Name of contact person at organization:				
Contact Fax	Contact Email: _			
Girl Scout person submitting reques				
Position with Girl Scouts:		Trod	op or SU	#:
Phone number:	Email:			
Event or activity that the certificate is needed for:				
Dates and times of event or activity				
☐ Did you receive an agreement or contract for this event/trip? If so, please include with this request.				
□ Did the organization give you a COI for them? If so, please include with this request.				