



## Request for Certificate of Insurance

### GENERAL INFORMATION

Date:

Club/Team/Organization Requesting Certificate (Rugby):

Event Name / Description:

Address:

### COVERAGE REQUIRED

Certificate Holder Name and Address (Third Party):

Commercial General Liability  
\$

Tenants Legal Liability  
Limit Required: \$

Host Liquor Liability  
Limit Required: \$

Added as Additional Insureds but only with respect to the liability arising out of the operations of the named insured.  
Name & Address:

Extensions Required:

Date Certificate Required:

Send to: Elisa DiGiulio

Phone:

Fax:

E-Mail: edigiulio@rugbyontario.com

Phone:

Fax:

E-Mail:

Phone:

Fax:

E-Mail:

### PRIVACY

Have you read Marsh's Privacy Policy which is available at [www.marsh.ca](http://www.marsh.ca)? Do you consent to the collection, use, disclosure and retention of your Personal Information as set out in the Privacy Policy, and do you understand that you may (subject to certain restrictions and consequences) later withdraw your consent as to any or all of the purposes identified in that Policy? By signing this form you are consenting to the statements above.

Please send to your provincial Rugby Union for forwarding to Rugby Canada and Marsh Canada Ltd.

**PLEASE ALLOW 3 WEEKS FROM APPLICATION DATE TO BE COMPLETED.**

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