



Girl Scouts.

Girl Scouts of Northern California
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Certificate of Insurance Request Form

SEND TO: INSURANCE SPECIALIST – OAKLAND OFFICE

Council Name: Girl Scouts of Northern California

Name and Telephone Number of Person Making Request _____

Please issue certificate to:

Name _____ Attention _____

Address _____ Fax _____

City / State / Zip _____ Email _____

The council's copy of the certificate will be sent by first class mail unless a fax number is provided above.

Certificate is proof of insurance for: Property Automobile General Liability

Purpose (name of event or activity) _____

If applicable, address of property for which certificate is needed: _____

Dates to be covered (Enter "annual" if use is year-long, i.e. troop meetings): _____

Is Certificate Holder required to be named Additional Insured? Yes No

Other Additional Insureds: _____

Certificate Holder must be named Additional Insured because of a:

Verbal Agreement Written Agreement (attach copy)

Send certificate to Certificate Holder at: Above Address

Fax Number _____

This Address _____

Certificates are mailed directly to the Certificate Holder by the insurance company and should be received within two to three business days. Emergencies can be faxed with a hard copy to follow in the mail.