2018-2019 Super Y League General Liability Certificate of Insurance Request Form

Instructions:

Complete and email this form to <u>certificates@monumentsports.com</u> or fax to: 866-352-1401 Please allow 24- 48 hrs to process and please call after sending if this is a rush request.

Please forward a copy of any contract/agreement/permit application this request is in reference to.

Super Y Team :	
Contact:	
Phone:	
Email:	
Date of Request:	
Date Certificate needed by:	
Certificate Holder/Additional Insured (Company/Organization requesting the certificate from you):	
(required) Company/Organiz	zation
Atte	ention
(required)Street Ad	dress
(required) City, State, Zip	
Brief Description for the request (i.e. Game/Practice Location, Youth Camp/Clinic, Marketing Event, etc)	
Does the Certificate Holder require additional insured status?	
If yes, please outline the role of the certificate holder.	
(i.e. landowner, game venue, practice venue, sponsor, etc) Have you entered into any agreement, contract or permit that contains Assumption of Liability, Indemnification or Hold Harmless language? **If yes, please forward a copy of document with this request**	
Additional Comments/Special Wording:	

Certificates will be emailed to the team contact listed above.

Please contact the following with any questions:

Mark Grossman, Jacob Franks or Kristin Lloyd

The Monument Sports Group

Phone: 866-674-1234

Fax: 866-352-1401

msg@monumentsports.com

1365 Overbrook Rd., Suite 1, Richmond, VA 23220