



9023 111 Avenue
 Edmonton, AB T5B 0C3

Ph: 780 474 2200
 Fax: 780 474 6300



CERTIFICATE OF INSURANCE REQUEST FORM

Instructions:

1. Club – please complete all sections of this form and forward it to your district for approval
2. District – approve club request, then email the completed form to operations@albertasoccer.com and cc to execdir@albertasoccer.com
3. Once the signed form is received, Alberta Soccer will submit it to the insurance company. Upon receiving approval, Alberta Soccer will email it back to the club and district.

Note: Certificate of insurance can be requested for any location within Canada or USA.

Requesting Club/Organization Information

Club/Organization Name:

Club/Organization Contact:

Position:

Address:

District/Tier/Division:

Third Party/Certificate Information

Name:

Address:

City:

Province/State:

Postal Code/Zip:

Country:

Reason for Certificate of Insurance

Event Start Date:

Event End Date:

*Event Type: On Field Off Field

Event Description: (e.g. indoor/outdoor field time, registration booths, banquets/awards evenings, etc.)

**If your event is on field, and in the province of Alberta, start date and end date can be based on indoor/outdoor season timelines.*

District Contact:

Signature:

Date: