



CERTIFICATE REQUEST FORM Canoe Ontario o/a Canoe Kayak Ontario

Please complete the following & email to:

**Arthur J Gallagher Canada Limited Sports & Recreation & Joanne Bryant at Canoe Kayak Ontario
 Arthur J Gallagher Sports & Recreation Department Email: IBAM.StoneyCreek.Sports@ajg.com
 & Canoe Kayak Ontario Email: joanne.i.bryant@gmail.com**

Certificates will be issued within 48 hours once approved.

Name of Insured and/or Member Club: Address of Insured and/or Member Club:	
Certificate Holder: Name & Address of Company/Organization who is requesting Certificate of Insurance from Insured: (i.e. Municipalities, Government Departments, Sponsors, Owners of Facilities/Not an insured member)	
Description of Operations/Event: Location of Operations/Event:	
<input type="checkbox"/> Sanctioned Activities Approved by the Association <input type="checkbox"/> Non Sanctioned Club Activities not related to (CKO) which are covered under policy # GAME00515	
Date of Event (if applicable):	
Date Certificate Requested:	
Certificate to be forwarded to: Please include the following; a) Contact Name b) Email Address or Fax # c) Mailing Address if Certificate is to be mailed	
Name & Address of Additional Insured's (if any) example – Municipalities, Government Departments, Sponsors, Owners of Facilities	