



Volunteer Chapter Certificate of Insurance Request

(Update 5/2/19)

Event Date _____ Event Type _____

Event Location [Name + Address] _____

Expected Attendance _____ Amount of Contribution _____

Have you received a request for a Certificate of Insurance?

Yes _____ No _____

If yes, from whom? _____

Chapter Name _____

President's Name + Address _____

Treasurer's Name + Address _____

Signatures: President _____

Treasurer _____

* One or both must sign

Important:

Please submit request **one month** in advance of event to:

Freedoms Foundation

Fax: 610.935.0522

ATT.: Bonnie Anderson

1601 Valley Forge Rd., Box 67

Valley Forge, PA 19481-0067

- OR - email: banderson@ffvf.org

As a Chapter Officer, never sign a contract to hold an event. Your signature on a contract could indicate acceptance of liability for the entire event, the building in which the event is being held, as well as other activities scheduled for the same day, same building, etc. If pressed for a signature on an agreement— usually known as a "Hold Harmless Agreement"—forward that agreement to the President's Office at Freedoms Foundation at Valley Forge, where it will be reviewed by counsel.