

INSURANCE CERTIFICATE INFORMATION

Required information needed to get insurance certificate/s:

Name of site: _____

Address of site: _____

Phone # of site: _____

Fax # of site: _____

E-mail Certificate to: _____

Date/s or ALL Events at this site certificates needed:

1. _____

2. _____

3. _____

Person requesting certificate/s: _____

Phone #: _____

Send information to Barbara Murray, PO Box 84, Dushore, PA 18614-0084. (Her email address is bemurray84@yahoo.com and her phone number is 570-928-8968.) Barbara will then email the Insurance Company of the request. Coverage is from February 3 to February 3 of the following year. Requests must be made each new year using this form. There is no charge for this coverage EXCEPT when requesting “additional insured” wording.

PFMC’s insurance is a Commercial General Liability policy. It does not provide coverage for personal items, such as a student’s instrument.