



REQUEST FOR SANCTION OR CERTIFICATE OF INSURANCE

Please send requests to Ashlie Avoledo at <u>aavoledo@alpinecanada.org</u> and allow 2 weeks for turnaround.

Description of sanctioned event/activity:	
Event/Activity Date:	
Is this event/activity part of the Calendar? YES NO	
If no, please explain	
Which Club/Division is to receive the sanction for the event?	
Event is under the control and direction of (person's name and the club/organization he/she belongs to:	
Location of the Event/Activity (include provincial address)	
Has ski area or other requested a certificate of insurance? YES NO	
Has Certificate Holder specified a Limit of Liability? YES Limit Required \$	NO
Certificate Holder: Venue Operator(s) e.g.ski resort, training facility, etc.(provide full legal name and address	Add as additional insured:
	T YES

If parties other than the certificate holder (not CSA members) are requesting to be added on as Additional Insured, please attach a list of names including description of their involvement in the event.

Requested by	y:	CSA Discipline	Alpine Canada Alpin	
Date:	Telephone No:	E	Email :	
۲۲۲۲-MI 33	M-DD 0 Admin fee charged to Clul	o and or Division r	equesting Cert	

Payment must be received by ACA prior to sending out Cert