

Requested by:

## **Certificate of Insurance Request**

## **INSTRUCTIONS:** COPY OF CONTRACT OR AGREEMENT MUST BE ATTACHED

OR

Date:

Sandy Manzoni smanzoni@resig.org

(707) 836-0779 x 106

(If yes, attach copy)

Date:

To: Redwood Empire Schools' Insurance Group ATTN:

Nicole Thysell

nthysell@resig.org (707) 836-0779 x 121

Group: Address: District: Contact: Phone #: **Email:** Fax #: Name & Address of Certificate Holder Phone #: Attention: Fax #: **Email: Date & Time of Event/Activity:** School/Sponsor: **Location of Event/Activity: Participants: Special Requirements: Description of Event/Activity:** Additional Insured endorsement required? Yes No **Special endorsements or wording required? Yes** No