

Requests for Certificates of Insurance
To be faxed/ emailed to Rowing Canada Aviron
rca@rowingcanada.org / 250 220 2503

Name of Insured: **ROWING CANADA AVIRON**

RCA Club / Association that is requesting Certificate from Insured: (Address required)	
Description of Operations/Event:	
Date of event (if applicable):	
Date Requested:	
Certificate to be forwarded to: Please include the following; <ul style="list-style-type: none"> a) Contact Name b) Email Address or Fax # c) Mailing Address if Certificate is to be mailed 	
Legal Names of Additional Insured's (if any) example – Municipalities, Government Departments, Sponsors, Owners of Facilities Address required	