

ORANGE COUNTY COUNCIL

BOY SCOUTS OF AMERICA

REQUEST FOR CERTIFICATE OF INSURANCE

TO: VOLUNTEER SERVICE DESK

FAX: (714) 546-8706

PHONE: (714) 546-4990 #s 128 OR 151

PLEASE COMPLETE ALL INFORMATION

CIRCLE ONE: UNIT ACTIVITY DISTRICT ACTIVITY COUNCIL ACTIVITY	
CIRCLE ONE (IF UNIT): PACK TROOP TEAM CREW SHIP POST	
UNIT NUMBER:	
NAME OF DISTRICT:	TOTAL FEES PAID FOR USE:
DESCRIPTION OF ACTIVITY: (camping, Eagle Project, fundraiser, etc...)	
DATE(S) OF ACTIVITY:	
LOCATION OF ACTIVITY: (multi-purpose room, Park, parking lot, etc...)	
FACILITY REQUESTING CERTIFICATE: (City, County, Park, etc...)	
FACILITY NAME:	
FACILITY ADDRESS:	
CITY, STATE, ZIP:	
FACILITY FAX NUMBER:	
(FACILITY'S REP) ATTENTION:	

IT IS THE POLICY OF THE ORANGE COUNTY COUNCIL AND NATIONAL COUNCIL TO **NOT** ISSUE ADDITIONAL INSURED ATTACHMENTS

PLEASE PROVIDE A COPY OF THE FACILITY USE FORM

PLEASE ALLOW AT LEAST TEN (10) BUSINESS DAYS FOR PROCESSING

ADDITIONAL COMMENTS:
