



BOY SCOUTS OF AMERICA®
PATRIOTS' PATH COUNCIL

CERTIFICATE OF INSURANCE REQUEST-effective 01/01/2024

REQUESTS ARE PROCESSED IN THE ORDER IN WHICH THEY ARE RECEIVED. PLEASE ALLOW AT LEAST TWO WEEKS FOR PROCESSING

Requester's Name: _____ Date: _____

Phone #: _____ Email: _____

Name of Property Holder requesting the Certificate of Insurance:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email of Property Holder contact: _____

Is this location your Chartered Organization? No Yes

A copy of the certificate of insurance will be emailed to the location listed above if an email address is provided.

****All COI requests MUST be accompanied by completed, unsigned copies of all agreements, applications, waivers, contracts and forms required by the certificate holder.**

*****All COI requests for fundraising events other than popcorn must include a completed Unit Money Earning Application signed by the Unit Leader, Committee Chair and Chartered Org Rep.**

Be careful that you do not sign any forms that require you to agree to "hold harmless" or "indemnify" the organization. You are not an officer of Patriots' Path Council and your signature on a document with those words does not represent the PPC or the BSA but it does put you and your assets at risk. Please reach out to us with any questions.

DESCRIPTION OF ACTIVITY: This information is needed for the certificate.

Type of Activity: Unit District Council

Unit Information: Pack Troop Crew Post Unit Number: _____

District Name: Fishawack Pioneer Raritan Valley Skylands

Description of Activity: _____

Date(s) of Activity: _____

Actual location or place of activity including address: _____

Are you being charged a fee by this location? No Yes Amount charged: _____

Please send all COI requests to 358CertificateofInsurance@scouting.org , allow a minimum of 2 weeks for processing, some requests may take longer.

Prepared. For Life.™