



DIOCESE OF VICTORIA LIABILITY CERTIFICATE REQUEST



To: CapriCMW Insurance and Diocese of Victoria
 Fax: 1-250-860-1213 or 1-250-479-5423
 Email: apexadmin@capricmw.ca & insurance@rcdvictoria.org

Parish/School: Contact person:
 Email: Fax:
 Tel: Date:

Re: Liability Certificate Request

Location:
 Event/Usage:
 Date of Event:

Recipient of Certificate:

Name:
 Address:
 Contact Person:
 Fax#:
 E-mail:

Do we need to add anyone to our policy as an additional insured with respect to this certificate? YES NO

If yes, name of party to be added: