

BB&T OLD DOMINION INSURANCE

P.O. BOX 6215

CHRISTIANSBURG, VA 24068

HOW TO REQUEST A CERTIFICATE OF INSURANCE
FOR RURITAN EVENTS

TODAY'S DATE: _____

YOUR PHONE #: _____ YOUR FAX #: _____

PERSON REQUESTING CERTIFICATE: _____

FULL NAME AND MAILING ADDRESS OF CLUB: _____

*(***The certificate holder is the person or organization asking your club to provide proof that you have insurance coverage for an activity in which your club is participating. Ex: Your club is having a food booth at the county fair and the Fair Grounds Committee asks you provide proof of insurance or certificate of insurance; then the Fair Grounds Committee is the Certificate Holder. Your club is the insured and your event is also insured.)*

***** THE FOLLOWING INFORMATION IS REQUIRED TO ISSUE A CERTIFICATE *****

CERTIFICATE HOLDER

(Optional) ATTN: _____

MAILING ADDRESS: _____

TOWN: _____ STATE: _____ ZIP _____

PHONE #: _____ IF APPLICABLE THEIR FAX # _____

DATE(S) OF EVENT: _____

NAME OF EVENT: _____

(BE SPECIFIC ABOUT THE ACTIVITY OF YOUR CLUB AT THIS EVENT) example: County Fair -- Food Booth; or Flea Market - Grounds Clean Up - Craft Sales, etc.)

Our Phone Number: (800) 280-2968

Our FAX Number: (540) 382-1011

Please allow time for the mail delay. Print information legibly. Thank you.