

K4E



Douglas J Kafoure Insurance Agency Inc  
Insurance for Churches as well as the people in the pews

## Event Involvement -Certificate Order Form

Name and address of organization/event to be named as Certificate Holder:

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Event Coordinator contact information:

Name \_\_\_\_\_ Phone # \_\_\_\_\_ Email \_\_\_\_\_

Provide the complete street address of event location:

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Event description: \_\_\_\_\_

Provide dates that your organization plans to participate in this event, including set-up and tear-down dates: \_\_\_\_\_

Describe your organizations involvement in this event (*ie; dancing, booth attendance, sports activities, swimming, climbing ladders, use of power tools, meeting, consultation, distribution of literature, etc.*): \_\_\_\_\_

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Limit of Coverage being requested by certificate holder: \_\_\_\_\_

Has an "Additional Insured Endorsement" been requested? \_\_\_\_\_ If yes, please attach image of instructions and/or written request provided to your organization.

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Our organization has reviewed and approved this certificate request.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print your name: \_\_\_\_\_ Title \_\_\_\_\_

Name of your organization and policy # \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

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Please submit your completed request form either by fax to (317) 357-5567 or send by email to: [office@k4einsurance.com](mailto:office@k4einsurance.com) for processing.