# V. CERTIFICATES OF INSURANCE

**Entertainment & Sports Insurance Experts, Inc.**
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# USA VOLLEYBALL CERTIFICATE REQUEST PROCESS

## Request from Club

1) Clubs will complete a certificate request form available from their Regional Volleyball Association. The form is also available on the USA Volleyball website as a downloadable PDF file.
2) Clubs will remit the request to the Region. The Region will then go to the ESIX online certificate request website (http://www.esixglobal.com). Each Region will be able to sign-on with a Login name and password provided by ESIX. From there, certificate information can be entered, and the certificate will automatically be available within seconds to the Region. If a certificate requires special wording, or special forms, etc., a request form can be submitted to ESIX by email, fax or mail.
3) If certificates are requested through ESIX, then ESIX will issue the certificate and will e-mail the certificate back to the requestor.

## Request from Region

1) Regions requesting a certificate for their own purpose can go to the ESIX online certificate request website (http://www.esixglobal.com). Each Region will be able to sign-on with a Login name and password provided by ESIX. From there, certificate information can be entered, and the certificate will automatically be available within seconds to the Region. The online website also allows for the Region to print copies of any cert issued to any club/certificateholder in the Region, or any cert issued to the Region itself. If a certificate requires special wording, or special forms, etc., a request form can be submitted to ESIX by email, fax or mail.
2) If certificates are requested through ESIX, then ESIX will issue the certificate and will e-mail the certificate to the Region.

## Request from National Office

1) The National Office may request a certificate by also going to the ESIX online certificate request website (http://www.esixglobal.com). The National Office will also be able to sign-on with a Login name and password provided by ESIX. From there, certificate information can be entered, and the certificate will automatically be available within seconds to the National Office. The online website also allows for the National Office to print copies of any cert issued to any club/certificateholder in any Region, or any cert issued to the National Office itself. If a certificate requires special wording, or special forms, etc., a request form can be submitted to ESIX by email, fax or mail.
2) If certificates are requested through ESIX, then ESIX will issue the certificate and will e-mail the certificate to the National Office.

If you have any policy related questions and technical issues, please contact your Account Representative, Jennifer Rains at 1-800-342-4371 Ext. 120, direct at 678-324-3320 or by email at jrains@esixglobal.com

**American Specialty will continue to house the certificates issued prior to 9/1/2010 on their website. If you are searching for old certificates, you can use your previously issued log in at their website: http://www.amerspec.com/certs.**

# CERTIFICATE OF INSURANCE REQUEST

**ALL REQUESTS BY CLUBS MUST BE SENT TO THE REGION**

REGION:_____ NEED BY DATE:_____

CLUB NAME: _____

ADDRESS:_____ CONTACT NAME: _____

_____ PHONE #: (____)_____

DOES THE CLUB REQUIRE A CERTIFICATE OF INSURANCE? _____YES _____NO
IF YES, CLUB WILL RECEIVE A CERTIFICATE AS PROOF OF INSURANCE)

PREFERRED METHOD OF CERTIFICATE DELIVERY:

___ FAX: _____ ____ E-MAIL:_____

AUTHORIZED RVA SIGNATURE:_____ DATE:_____

Please attach to this form a list of scheduled tournaments to be organized/sponsored by the Club as well as a list of the facilities to be utilized (with full business name and address) for practices or tournaments by the Club.

SEND ADDITIONAL INSURED CERTIFICATES TO _____ CLUB
_____ CERTIFICATE HOLDER

CERTIFICATE HOLDER

1) NAME: _____ ATTENTION OF: _____

ADDRESS: _____ ADDITIONAL INSURED _____ YES

_____ _____ NO

___ FAX: _____ ____ E-MAIL:_____

LIMITS OF COVERAGE REQUESTED: _____ GENERAL LIABILITY ($1,000,000)
_____ EXCESS LIABILITY

(ONLY CHECK FOR EXCESS LIABILITY IF CERTIFICATE HOLDER REQUIRES MORE THAN $1,000,000 OF COVERAGE)

REASON FOR CERTIFICATE: ____ Building Owner _____ Sponsor _____ Tournament

_____ Other – Describe: _____
Special Instructions: _____

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2) NAME: _____ ATTENTION OF: _____

ADDRESS: _____ ADDITIONAL INSURED _____ YES

_____ _____ NO

___ FAX: _____ ____ E-MAIL:_____

LIMITS OF COVERAGE REQUESTED: _____ GENERAL LIABILITY ($1,000,000)
_____ EXCESS LIABILITY

(ONLY CHECK FOR EXCESS LIABILITY IF CERTIFICATE HOLDER REQUIRES MORE THAN $1,000,000 OF COVERAGE)

REASON FOR CERTIFICATE: ____ Building Owner _____ Sponsor _____ Tournament

_____ Other – Describe: _____

Special Instructions: _____

3) NAME: _____ ATTENTION OF: _____

ADDRESS: _____ ADDITIONAL INSURED _____ YES

_____ _____ NO

___ FAX: _____ ____ E-MAIL:_____

LIMITS OF COVERAGE REQUESTED: _____ GENERAL LIABILITY ($1,000,000)
_____ EXCESS LIABILITY

(ONLY CHECK FOR EXCESS LIABILITY IF CERTIFICATE HOLDER REQUIRES MORE THAN $1,000,000 OF COVERAGE)

REASON FOR CERTIFICATE: ____ Building Owner _____ Sponsor _____ Tournament

_____ Other – Describe: _____

Special Instructions: _____