



Cowboy Mounted Shooting Association
PO Box 1529
Columbia, TN 38402-1529
1-888-960-0003 Fax (931) 388-3564
www.cmsaevents.com

Charter Club Additional Insurance Request Form

Requests for Additional Insurance forms for facilities rented and/or performed in should be submitted at least 10 days prior to the event requiring the addition. A fee of \$25.00 is charged for each document provided. Requests made under the 10 day period will be charged a \$20.00 rush handling fee. CMSA will invoice the club for each additional insured certificate. If a club knows in advance that they will need certificates for several dates at the same location those dates can be included on one additional insured form, but those must be supplied at one time. Please fill out the forms in advance to avoid rush fees and potential cancellation of events. All information below is required.

Club Code _____ Club Name _____

Club Representative's Name _____

Phone # _____ - _____ - _____ E-mail address _____

Why is additional insured being requested (e.g. premises owner)? _____

Exact Date(s) of Event(s) _____

If holding multiple dates over one period, like two WPQ's on one weekend those dates must be separated by event, not a date range. Only multi-day events like a State & Regional should have a date range.

Name of Facility _____

Full legal name of additional insured being requested. Is it an Inc. , LLC, Ltd, etc. or personally owned?

If personally owned, who is the owner? _____

Complete Address of Facility _____

Facility Phone # _____ - _____ - _____ Facility Fax # _____ - _____ - _____

Facility Contact Person _____

Is the event open to members only? Yes / No

Is the event open to the public? Yes / No