



**REQUEST FOR CERTIFICATE OF INSURANCE  
AND ADDITIONAL INSURED**  
◆◆ FOR ALL USAC PERMITTED EVENTS ◆◆

Applications must be submitted with permit unless information is not yet available.  
Application must be received **prior to event** or it will not be processed.

**Mail to:** ◆ USA Cycling ◆ 210 USA Cycling Point, Suite 100, Colorado Springs, CO 80919 ◆ Ph: 719/434-4200  
◆ Fax: 719/434-4300 ◆ Email: membership@usacycling.org

**Event Permit #** \_\_\_\_\_

<b>Name of Club/Organizer:</b> _____	<b>Club/Organizer #:</b> _____
<b>Phone Number:</b> _____	<b>Fax:</b> _____
<b>Event Name:</b> _____	<b>Event Date:</b> _____
<b>Event Location:</b> _____	<b>E-mail:</b> _____

List all parties who are requiring that they be named as additional insured for this event. **THIS IS NOT VALID WITHOUT A RELATIONSHIP INDICATED.** Examples of relationship categories include landowner, permit holder (governmental bodies which have issued permits), sponsor, municipality, etc. **The first five additional insured parties are FREE.** You may request as many more additional insured parties as necessary **for an additional administrative fee of \$5 each** (please attach additional copies of this page as needed). **PLEASE PRINT.**

- 1) **Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Relationship** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_
- 2) **Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Relationship** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_
- 3) **Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Relationship** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_
- 4) **Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Relationship** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_
- 5) **Name** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Relationship** \_\_\_\_\_  
**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

Have you entered into any agreement, contract, or permit in conjunction with this event that contains assumption of liability, indemnification, or hold harmless language?     YES     NO  
If yes, please forward a copy of the document with this Request for Certificate of Insurance and Additional Insured.