



USA *Volleyball.*

V. CERTIFICATES OF INSURANCE

ESIX

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Revised 9/9/2009



USA *Volleyball.*

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 American Specialty on-line certificate request website (<http://www.amerspec.com/certs>). Each Region will be able to sign-on with a Login name and password provided by American Specialty. 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 American Specialty by email, fax or mail.
- 3) If certificates are requested through American Specialty, then American Specialty will issue the certificate and will either e-mail, fax or mail the certificate to either the Club, facility (certificate holder) and/or Region. Delivery method and location depends on what the Club and Region indicate on the request.

Request from Region

- 1) Regions requesting a certificate for their own purpose can go to the American Specialty on-line certificate request website (<http://www.amerspec.com/certs>). Each Region will be able to sign-on with a Login name and password provided by American Specialty. From there, certificate information can be entered, and the certificate will automatically be available within seconds to the Region. The on-line 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 American Specialty by email, fax or mail.
- 2) If certificates are requested through American Specialty, then American Specialty will issue the certificate and will either e-mail, fax or mail the certificate to either the Region or the certificate holder. Delivery method and location depends on what the Region indicates on the request.

Request from National Office

- 1) The National Office may request a certificate by also going to the American Specialty on-line certificate request website (<http://www.amerspec.com/certs>). The National Office will also be able to sign-on with a Login name and password provided by American Specialty. From there, certificate information can be entered, and the certificate will automatically be available within seconds to the National Office. The on-line 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 American Specialty by email, fax or mail.
- 2) If certificates are requested through American Specialty, then American Specialty will issue the certificate and will either e-mail, fax, or mail the certificate to either the National Office or the certificate holder. Delivery method and location depends on what the National Office indicates on the request.



If you have any policy related questions, please contact your Account Representative, Kris Whitted at 800-245-2744 or kwhitted@amerspec.com. To report any technical support@amerspec.com.

American Specialty Website: <http://www.amerspec.com/certs>. To view the on-line certificate demo, login to <http://www.amerspec.com/certs/usav800.htm>.
Fax: 260-672-8835

To obtain the login information (username and password), please contact Kerstin Fracassini-Rieff (Kerstin.franassini@usav.org) or Tori Hoke (tori.hoke@usav.org) at the National Office. Phone: 719-228-6800, Fax 719-228-6899



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 facilitie(s) (name and address) to be used 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: _____



CERTIFICATE OF INSURANCE REQUEST – PAGE 2

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: _____

