



**CANYONS**  
School District  
"Celebrating the Highest  
Standards of Educational Excellence"

## **Risk Management**

### **Request for Certificate of Insurance**

#### **Certificate Requester**

Name: \_\_\_\_\_

School/Dept.: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

#### **Entity Requesting Certificate**

Name: \_\_\_\_\_

School/Dept.: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

#### **Event Information**

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

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Description of Event: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***All requests should be returned to Risk Management***

***Attention: Kevin Ray***

***Fax: 801-826-5069***

***For further questions, please contact Kevin Ray at 801-826-5143***