



BFL CANADA services de risques et assurances inc.
 BFL CANADA Risk & Insurance Services Inc.
 c/o 2001 McGill College Avenue, # 2200
 Montréal QC H3A 1G1
 Tel.: 514 843-3632
 1-800-465-2842

C/O Archery Canada / Tir à l'Arc Canada, House of Sport 2451 Riverside Drive, Ottawa, ON K1H 7X7
 T: (613) 260-2113 email: insurance@archerycanada.ca

CERTIFICATE OF INSURANCE REQUEST FORM – NON PROFIT CLUBS

This is to certify to:

(Name of entity requesting proof of insurance) _____

Address: _____

that the following described policy(ies) or binder(s) in force at this date have been effected to cover as shown below:

Name of Insured: **ARCHERY CANADA / TIR À L'ARC**
 House of Sport 2451 Riverside Drive, Ottawa, ON K1H 7X7

And (Provincial Office): _____

Address: _____

Name Team/Club/Assoc.: _____

Contact: _____ Tel. No.: _____

Email: _____

Description of Event(s): _____

Location of Event(s): _____

Date(s): _____

Type	Insurer	Policy n°	Policy Period	Limits – Amounts of Insurance (Canadian Funds)	
Commercial General Liability Insurance	Markel Canada	CAS782201-04	January 1 st , 2026	\$5,000,000	Per occurrence
			to January 1 st , 2027	\$5,000,000	Tenant's Legal Liability

ADDITIONAL INSURED (LEGAL NAME):	IF ADDITIONAL LIST ATTACHED, PLEASE CHECK <input type="checkbox"/>
1. _____	4. _____
2. _____	5. _____
3. _____	6. _____
<p>THE ABOVE ENTITIES WILL BE ADDED TO THE POLICY AS ADDITIONAL INSURED BUT ONLY WITH RESPECT TO THE OPERATIONS OF THE NAMED INSURED DESCRIBED ABOVE. THE CERTIFICATE APPLIES TO THE MEMBERS AND AUTHORIZED PERSONNEL OF THE INSURED WHILE OPERATING WITHIN THE SCOPE OF THEIR DUTIES AND APPLIES ONLY TO THE DATES OF THE EVENT AS MENTIONED ABOVE.</p>	

This certificate request form has been approved by: _____