



## MBX Foundation Request for Insurance Coverage

Today's Date

Name of person making this request

Your organization

Date(s) of Event	Start	End
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Name of Event

Is this an MBUSD event?

Is the event run by another entity?

If yes, has a contract been signed, or have you been asked to sign a contract?  
(Please forward the contract)

Is a certificate of insurance requested? (Please forward the request)

Description of Event

Location of Event

# of Students who will attend

# of Parents/Others who will attend

Expected funds raised

Notes

- Please complete and forward to [whittetl@mbxprograms.org](mailto:whittetl@mbxprograms.org) least 60 days prior to your event.
- Clinics, classes, summer camps will require a liability waiver from all participants
- School functions, such as banquets held at the end of the season/school year are covered by MBUSD and do not need MBX coverage.