



Insurance Certificate Request Form

In order to obtain a Certificate of Liability insurance for the facility you are using in your clubs name complete the following information and email to insurance@njyouthsoccer.com. Allow 3 business days for processing.

Club Information:

Club Requesting Certificate: _____

Club Street Address: _____

City, Street & Zip: _____

Contact Person: _____

Phone: _____

Email (required): _____

Reminder: Certificates of Liability Insurance are issued on behalf of member clubs and leagues to facility and field owners who need proof of coverage.

Additional Insured Information:

Field Owner's Legal Name: _____

Field Owner's Address: _____

Field Owner's City/ State/Zip: _____

Field Owner's Phone: _____

Field Address (if different then above) _____

Endorsement Needed (A request from the additional insured or property owner for a CG 2026 form)

Is this for Tournament Golf Cart Insurance: Y N (If yes fill in below)

Name and Date of Tournament: _____

Credit Card # _____ Exp. Date _____

Name on Card _____