

CERTIFICATE OF INSURANCE REQUEST FORM - STUDENT FILM SHOOT

When the property owner of a site location requests a certificate, this form must be **submitted to the Office of Risk Management (Job Hall 3) at least 10 days in advance of the shoot. If more than one site is used, a separate form is required for each requesting property owner.**

**** ITHACA COLLEGE WILL NOT INSURE ANY EQUIPMENT RENTED BY STUDENTS ****

COURSE NAME AND NUMBER: _____

INSTRUCTOR'S AUTHORIZATION: I verify that the student listed below is completing this film shoot as a course requirement.

INSTRUCTOR NAME (Printed): _____

INSTRUCTOR'S SIGNATURE/DATE: _____

Student Name: _____ ID #: _____

Student Phone: _____

Title of Film Shoot: _____

Student **MUST** give a full description of the action in the film shoot :(ex. running, jumping, walking, sitting, etc.):

Specific Shoot Location: _____

Date(s), including rain dates: _____

Number of people involved in shoot: _____ Are any participants non Ithaca College students? _____

If yes, explain: _____

Name/Address of Organization Requesting Certificate: *Be CERTAIN the first line reads EXACTLY as requested, i.e. City of Ithaca, YMCA, etc. An error will delay your project!*

ATTENTION: _____

Phone number: _____

FAX number: _____

EMAIL Address: _____

Does the organization require that it be named as "ADDITIONAL INSURED" on the certificate? Yes___ No___

- (Check One) E-Mail certificate to organization
 FAX certificate to organization (*this option will get your certificate there faster*)
 USPS mail certificate to organization