



## Certificate of Insurance Request Information

**SEND THIS TO YOUR INSURANCE AGENT WITH THE REQUEST FOR A CERTIFICATE OF INSURANCE:**

**Insurance Limits:** Limits of not less than One Million Dollars (\$1,000,000) combined single limit. School District, its officers, directors and employees as additional insureds.

**Additionally Insured Information:** The certificate shall name the School District, its officers, directors and employees as additional insureds, and provide not less than ten (10) day's notice of cancellation or material change.

*Wenatchee School District, its officers, directors and employees  
235 Sunset Avenue  
Wenatchee WA*

Please upload your certificate when filling out your application. If you have already completed an application, have the certificate emailed directly to:

**[facilities@wenatcheeschools.org](mailto:facilities@wenatcheeschools.org)**