

**RMFMS APPLICATION**  
**FOR**  
**ADDITIONAL INSURED ENDORSEMENT**

Name and Mailing Address of Club-

Name, address and email address of Club Member where form is to be sent for Club –

NAME OF EVENT –

DESCRIBE THE TYPE OF EVENT -

DATE(s) OF EVENT -

NAME, EMAIL ADDRESS AND ADDRESS OF THE “ADDITIONAL INSURED” (CERTIFICATE WILL BE EMAILED TO “ADDITIONAL INSURED” WHEN EMAIL ADDRESS IS AVAILABLE) –

RELATIONSHIP BETWEEN “ADDITIONAL INSURED” AND THE CLUB - landlord

Special Instructions for this event (if any) –

Complete and email this form to: [gandpmaggard@gmail.com](mailto:gandpmaggard@gmail.com) by two weeks before event.

If you do not have email, Mail to Gene Maggard, 8318 SE HWY 77, Leon, Ks 67074 at least three weeks before event. We cannot be responsible for forms emailed or mailed after these deadlines.