

Application for Safe Grad Liability Insurance Coverage

1. School Division/District: _____
2. Name of School: _____
3. Address: _____
4. Coordinators: _____
5. Date of Safe Grad: _____
6. Location of Safe Grad (name of hall, arena, etc. and address): _____

7. Have local police been notified of event? Yes
8. Activities planned: _____

9. Detailed plan of transportation: _____
10. Please indicate the name and address of the person to whom the approval notice is to be sent.
Name: _____
Address: _____
City: _____ Postal Code: _____ Phone Number: _____

NOTE: STUDENT DRIVERS ARE NOT PERMISSIBLE

MAIL TO:

**Manitoba Safe Grad
191 Provencher Boulevard
Winnipeg, MB R2H 0G4**

OR: Fax: 204-231-1356 OR: Email: safegrad@mast.mb.ca

Please Note: There is no charge for liability insurance coverage for Safe Grad Committees (including members and volunteers thereof) of Manitoba public schools involved in the Safe Grad program. Coverage applies in respect of their operation of Graduation exercises sanctioned by the Manitoba Safe Grad Steering Committee.