

First Division, Army of Northern Virginia

Insurance Form

(Please type or print clearly)

1. Battalion (circle one)

1 2 3 4(1st NC) 5 6 7 8 9 10 11 Art Cav. Div.Staff

2. Unit _____

3. Submitter's Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Phone: _____

E-mail: _____

4. Unit Commander's Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Phone: _____

E-mail: _____

ANV Liability/Accident: Every person over the age of 13, and any person who takes the field in any capacity allowed by the ANV SOP's/SOG's, **MUST** be covered by liability insurance. The fees are as follows: Liability is \$5.00-Accident is \$3.00 for a total of \$8.00 plus dues of \$4.00 for a total of \$12.00. Each person aged 12 and under must pay a premium of \$3.00 for Accident insurance plus \$4.00 dues for a total of \$7.00. Example:

Soldier-18 and older

Soldier - 16 years old & up to 18

Soldier - 14 years old and above

Civilian-18 and older

Civilian - 13 years old & up to 18

Civilian - 12 or under

Combatant - pays \$12.00 premium

Minor Combatant - pays \$12.00 premium (must have parent/guardian present)

Musician/flag/ice - pays \$12.00 premium (must have parent/guardian present)

Civilian - pays \$12.00 premium

Minor Civilian - pays \$12.00 premium

Minor Civilian Child - pays \$7.00 premium

****At this time, a unit may purchase their own liability coverage but must pay dues to ANV of \$4.00 per person and have the insurance company provide a Certificate of Liability to the Insurance Coordinator. ** It is suggested that Cavalry and Artillery carry additional liability insurance to cover themselves when not participating in an ANV event.**

*****All checks must be made out to **First Division, Army of Northern Virginia**. The Division is requesting that each Company submit their insurance application and check to the Adjutant of their Regiment/Insurance Coordinator to be verified and forwarded to the Division Insurance Coordinator.**

All insurance premiums and questions should be sent to:

Jennifer Haines

221 Lakeland Port

Sanford, NC 27332

(540)664-5984 email: haines.jl48@gmail.com

Total Amount Submitted: _____

