

DD MONTH YYYY

MEMORANDUM FOR 66 FSS/FSR

FROM: (Name of Private Organization)

SUBJECT: Annual Waiver of Insurance Requirement

1. The collective officers of this private organization (PO) has evaluated if a need for liability insurance is still required. We have assessed the type of activities that this PO will be engaged in for the upcoming year while considering the associated risks. Ultimately, we have determined the risk of liability is negligible and therefore revalidating the waiver for liability insurance for the next 12 months.
2. We have informed all the PO members they are jointly and severally liable for the obligations of this PO and they acknowledge the absence of liability insurance places their personal assets immediately at risk in the event of a PO liability (see attached Statement of Understanding of Liability).
3. Furthermore, we understand that liability insurance may be required for specific events that involve a greater risk of injury or damage.

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Printed Name, President

Phone:

Email:

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Printed Name, Vice President

Phone:

Email:

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Printed Name, Secretary

Phone:

Email:

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Printed Name, Treasurer

Phone:

Email: