

**MEMORANDUM FOR:** 375 FSS/CC  
215 Heritage Drive  
Scott AFB IL 62225

**DATE:** \_\_\_\_\_

**FROM:** \_\_\_\_\_

**SUBJECT:** Request for Waiver of Insurance Requirement

1. On behalf of the membership of the Private Organization/Unofficial Activity, identified above, requests a waiver of insurance requirements specified in AFI 34-223, Section C, 9.2.2.

2. In making this request, we realize our responsibility to maintain adequate insurance coverage based on risks posed to the general public and org members. As we are a low risk organization in our day-to-day activities, full-coverage insurance is, generally, not necessary. However, should we engage in activities that directly increase the risk to those affected, we will purchase the appropriate insurance. Such instances include but are not necessarily limited to the examples listed below:

- a. Bazaars, as a cosponsor who furnishes workers.
- b. Any fundraising activity open to the general public where athletic or sports-type activities are sponsored or conducted by the organization.

3. Furthermore, all members have been made aware and understand that they may be held jointly and severally liable for claims against the organization for injury or damage caused by our negligence and/or insolvency in the event that we lack insurance coverage or in the case where the claim exceeds our insurance coverage.

**Name:** \_\_\_\_\_

**Position in PO/UA:** \_\_\_\_\_

Waiver is: Approved

Approval Authority/Delegee: \_\_\_\_\_