

To The Saskatchewan Organization for Heritage Languages

2144 Cornwall Street
Regina, Saskatchewan
S4P 2K7

Date: _____

From: (Name of School) _____

_____ I choose to opt out of the coverage provided by the Saskatchewan Organization for Heritage Languages for liability for member schools because I am covered by the following policy:

Policy Holder:

Date of Coverage: _____ to _____.

Name of Insurer:

Policy Number: _____

Please provide a copy of the insurance policy.

_____ I choose to use SOHL's insurance policy which will cover our organization for liability including Director's Liability. We are a non-profit organization.

Name of School Representative: _____

Phone Number: _____

Signed: _____

I understand that if I do not have a policy in place for the school that I will be covered by SOHL's policy at a cost of \$50.00 to be deducted from my member funding. This amount will be deducted and my school will be covered automatically if this opt out form is not completed and sent to the SOHL office by September 25, 2009. If you are not receiving funding for the 2009-2010 school year but are a member in good standing, you will be covered if we receive a cheque for \$50.00 for insurance by September 25, 2009.