



Return this form to:  
**Adventist Risk Management, Inc.**

Placement Services  
12501 Old Columbia Pike  
Silver Spring, MD 20904  
[volunteerlabor@adventistrisk.org](mailto:volunteerlabor@adventistrisk.org)

**ACCIDENT INSURANCE FOR VOLUNTEER LABOR COVERAGE ENROLLMENT FORM**  
(VOLUNTEER ACTIVITY INCLUDING CONSTRUCTION)

**YOUR DIVISION** \_\_\_\_\_ **UNION** \_\_\_\_\_ **CONFERENCE** \_\_\_\_\_

**ACADEMY, LOCAL CHURCH GROUP OR INDIVIDUAL** (Name, Address & Phone Number)  
(Local churches, PLEASE be sure to list the name of your conference above)

Contract Name: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone No: \_\_\_\_\_

**NAME** (Each participant must be listed separately beginning with Group Leader. Please attach additional sheets as needed).

- |          |           |           |
|----------|-----------|-----------|
| 1. _____ | 6. _____  | 11. _____ |
| 2. _____ | 7. _____  | 12. _____ |
| 3. _____ | 8. _____  | 13. _____ |
| 4. _____ | 9. _____  | 14. _____ |
| 5. _____ | 10. _____ | 15. _____ |

Type of Construction \_\_\_\_\_

Address of Project \_\_\_\_\_

Date Project Begins: \_\_\_\_\_ Date Project Ends: \_\_\_\_\_

Number of Participants: \_\_\_\_\_ Number of Days: \_\_\_\_\_ Premium Amt. \_\_\_\_\_  
(\$1.45 USD per volunteer per day)

**TOTAL PREMIUM** \_\_\_\_\_

**\*USA: All checks are to be made payable to Adventist Risk Management, Inc. and posted with this application to the above address otherwise, coverage will not be effective. Invoicing is only available as authorized by a billable entity**

\_\_\_\_\_  
**Authorized Signature**

\_\_\_\_\_  
**Title**

\_\_\_\_\_  
**Date**

Accident Insurance for US residents is underwritten by Federal Insurance Company, a member insurer of the Chubb Group of Insurance Companies. The coverage described in this literature may not be available in all jurisdictions. This literature is descriptive only. Actual coverage is subject to the language of the policies as issued (policy #9907-34-39). Exclusions and limitations apply. Chubb, Box 1615, Warren, N.J. 07061-1615.