

## GAINSBOROUGH METHODIST CHURCH North Street GAINSBOROUGH Lincolnshire DN212HP

Group/Organisation Public Liablity Insurance declaration form
Hirer's Name:
Group/Organisation Name:
I confirm that the above named group has it's own <b>Public Liability Insurance</b> , the details of which are listed below.
Insurer's Name:
Policy No:
Expiry Date:
Signed:
Print Name:
Checked by: (for the Gainsborough Methodist Church)
Date: