

DATE

MEMORANDUM FOR 39 FSS/FSR
39 FSS/CC
39 ABW/JA
39 MSG/CC

FROM: [Name of Private Organization]

SUBJECT: Insurance Waiver Request

1. The [Name of Private Organization] requests a waiver to the requirements of AFI 34-223, *Private Organizations*, regarding liability insurance.
2. The traditional activities of the [Name of Private Organization] are [List at least two activities to include fundraising.]. Normally these activities do not include any events considered high risk for potential personal injury or property damage. However, if a new or special activity is contemplated that entails a foreseeable risk the [Name of Private Organization] will obtain the required insurance IAW AFI 34-223, paragraph 10.11.
3. The [Name of Private Organization] and its members acknowledge that the members remain jointly and severally liable for the obligations of the private organization and that the absence of liability insurance places personal assets immediately at risk in the event that the private organization incurs debts, such as through lawsuits.
4. The [Name of Private Organization] and its members further acknowledge that the waiver, if approved, is only good for one year from the date noted above.

[Name of President]
President, [Name of Private Organization]

