

Catholic Association of Foresters
PO Box 850888
Braintree, MA 02185

ASSIGNMENT OF CERTIFICATE

County of: _____

State: _____

For value received, I, the undersigned, (Assignor) _____
holder of certificate of insurance in the Catholic Association of Foresters, bearing Number: _____
do hereby convey, transfer, release, and assign to: (Assignee): _____
(Address) _____

All rights, title and interest, which the undersigned has in and under the above numbered certificate of insurance.

I, the undersigned do hereby empower and authorize the Catholic Association of Foresters to make any settlements of any due and just claim arising under the said certificate of insurance, to the aforementioned assignee subject to the other terms and conditions on the reverse side as they may apply to do hereby release, remise and forever discharge and hold harmless the said Catholic Association of Foresters, its successors or assigns, its board of directors, officers or employees, from any and all liability, claim or demand thereunder by reason of any transfers, act, revisions, conversations or settlements, as may be directed as a result of this assignment.

By execution of this Assignment, I, the undersigned also agree to the terms and conditions as noted on the reverse side.

Member's Name: _____

Sworn and subscribed to before me a Notary Public on the _____, Day of _____, 20 .

My Commission Expires: _____

Notary Public: _____

OTHER TERMS AND CONDITIONS OF ASSIGNMENT

1. ***ASSIGNOR'S SIGNATURE must be that of the insured if the insured is 16 years of age or older (Adult) at the time of this assignment.***
2. ***ASSIGNOR'S SIGNATURE must be that of the original applicant if the insured is under 16 years of age (Juvenile) at the time of this assignment.***
3. ***If the ASSIGNOR'S SIGNATURE is to be other than the insured on the assignment of an adult (see No.1) Certificate of Insurance, then a power of attorney, letters of guardianship, conservatorship, administration, or in-competency or other legal documentation must accompany this assignment.***
4. ***If the original application of a Juvenile Certificate of Insurance is deceased a death certificate of the deceased applicant must accompany this assignment.***
5. ***In addition to the requirement of the death certificate in No.4 above, evidence of legal and proper guardianship of the minor must be submitted by and assignor who is not the original applicant.***

RECOGNIZED LINE OF SUCCESSION

1. ***Court or legally directed and approved guardianship.***
2. ***Mother or Father or the spouse who survives the other.***
3. ***Eldest to youngest among brothers and sisters in age succession.***
6. ***This Assignment will not be subject to withdrawal or revocation without legal documentation of such request made by the original assignee or his, her successor(s). Any successor assignee must furnish evidence of death or incompetence of original Assignee if these conditions exist.***
7. ***The Assignee is hereby informed that on any Juvenile Certificate of Insurance that is assigned, the assignment automatically becomes invalid on the juvenile's 16th birthday. On this date the juvenile becomes an adult and control of the Certificate of Insurance becomes automatically invested in the named insured.***