

DATE

MEMORANDUM FOR 366 FW/JA

FROM: PRIVATE ORGANIZATION NAME

SUBJECT: Insurance Waiver Request

1. Members of the PO NAME believe our organization to have low liability exposure and request a waiver of the insurance requirement for private organizations in accordance with AFI 34-223.
2. We understand approval of this waiver would not protect the organization or its members from valid claims or successful lawsuits. If the organization conducts special events greatly increasing the risks, we will obtain insurance protection commensurate with the risks.

NAME OF REPRESENTATIVE
PO NAME Representative

1st Ind, 366 FW/JA

MEMORANDUM FOR 366 FSS/CC

Recommend ~~Approval~~/Disapproval.

NAME OF LEGAL REPRESENTATIVE
Judge Advocate/Paralegal

2d Ind, 366 FSS/CC

MEMORANDUM FOR PO NAME

~~Approved~~/Disapproved.

ALLYSON P. STRICKLAND, Lt Col, USAF
Commander