

**Identification**

Policy:

Name of person to be insured:

First Name of person to be insured:

Date of birth:  /  /   
year / month / day

**Section Racing**

1. Type of race:

Sport car  Stock car  Drag  Formula car (type of formula)  Motorcycle (type)  Snowmobile

Others (detail) \_\_\_\_\_

2. What type of vehicle do you drive? \_\_\_\_\_

Who is the owner? \_\_\_\_\_

3. Type of track?  Oval  Roads circuits  Others (detail) \_\_\_\_\_

Track surface:  Dirt road  Paved  Ice  Other (detail) \_\_\_\_\_

4. Indicate the number of races that you have participated in and the distance travelled.

Location: \_\_\_\_\_

In the last 12 months. Number (km/miles) \_\_\_\_\_

In the last 12 to 24 months. Number (km/miles) \_\_\_\_\_

In the next 12 months. Number (km/miles) \_\_\_\_\_

5. Do you participate as:  A professional  An amateur  Both



**Racing (...continued)**

6. Who sanctions these races? \_\_\_\_\_

7. Have you ever had an accident while racing?  Yes  No

If yes, details: \_\_\_\_\_  
\_\_\_\_\_

8. Additional information:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you cannot meet the standards of full coverage at standard rates, would you prefer:

Full coverage with an extra premium, if we can offer this to you?

Coverage with restrictions, if we can offer this to you?

I, the undersigned, declare that the above answers are true and complete and shall form part of my application for insurance with Humania Assurance.

Signed at: \_\_\_\_\_

Date: 

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year / month / day

Signature of witness: \_\_\_\_\_

Signature of person to be insured: \_\_\_\_\_