

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 vehicule 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 professionnal 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:  year / month / day
Signature of witness:
Signature of person to be insured:

Humania Assurance Inc., 1555 Girouard Street West, Saint-Hyacinthe, Quebec J2S 2Z6