



Motor Cycling Questionnaire

Give a full and complete answer to each of the questions continuing your answer on a separate sheet of paper if necessary

Full Name.
1. What type of motor cycle do you use (make, cc etc.)?
2. Specific types of events? (e.g. Speedway, Drag Racing etc.).
3. Do you take part in Amateur, National or International Events?
4. Number of events per annum?
5. Please give location of circuits raced? Does this include the Isle of Man TT Races?
6. How many years have you been racing?
7. Are you sponsored? And do you use a personal vehicle? If not state owner?
8. Has the type of event changed in the last three years?
9. Have you suffered any accident in which personal injury or substantial vehicle damage resulted? If so please give full details.
10. Do you participate, or expect to participate in any form of record attempts or experimental cycling? If so please give full details.

Declaration.

I declare that the answers I have given are, to the best of my knowledge, true and that I have not withheld any material information that may influence the assessment of this proposal. I agree that this form will constitute part of my proposal for life assurance and that failure to disclose any material fact known to me may invalidate the contract.

Signed.....Date.....

Please return this form to; Lutine Assurance Services Ltd, 154 Great Charles Street, Birmingham, B3 3HN. Tel 0121 200 1919, Fax 0121 200 1921

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