



INSURANCE MARKETING SERVICES

PRODUCTS SERVICE AND TECHNOLOGY

Motor Sports Questionnaire

Information gathered will be used in the evaluation of the insurability of the applicant. Offers are tentative and are subject to verification of the submitted medical evidence and other criteria used in the underwriting of life insurance.

Agent's Name: _____ Phone #: _____

Proposed Insured: _____ Date of Birth: ___/___/___

Male () Female () Height _____ Weight _____ Smoker () Non Smoker ()

Amount of Coverage \$ _____ Product Type _____

1. Do you engage in exhibitions or organized competitive motor sports? Yes No

2. Check below the type(s) of events you pursue:

- | | | |
|--|--|--|
| <input type="checkbox"/> All Terrain (ATV) | <input type="checkbox"/> Formula Racing | <input type="checkbox"/> Snowmobiles |
| <input type="checkbox"/> Championship Cars | <input type="checkbox"/> Kart Racers | <input type="checkbox"/> Sport Cars |
| <input type="checkbox"/> Demolition or Destruction Derby | <input type="checkbox"/> Midget Cars | <input type="checkbox"/> Sprint Cars |
| <input type="checkbox"/> Drag Racing | <input type="checkbox"/> Motorcycles | <input type="checkbox"/> Stock Cars |
| <input type="checkbox"/> Dune or Sand Buggy or Cycle | <input type="checkbox"/> Off Road, Desert, Trail Competition | <input type="checkbox"/> Time Speed Trials |
| <input type="checkbox"/> Figure 8 Demolition Derby | <input type="checkbox"/> Pikes Peak Hillclimb | <input type="checkbox"/> Others |
| <input type="checkbox"/> Football Demolition Derby,
Auto Football or Soccer | <input type="checkbox"/> Power Boats | (Explain in Question 15 below) |
| | <input type="checkbox"/> Rally (YE) | |

3. What specific type of event do you compete in with the above vehicle(s) (e.g., roadrace, endurance, sprint, motocross)?

4. In what class do you compete (be specific: include make, model, engine size, class designation of you vehicle)?

5. Under what sanctioning body do you normally compete (e.g., AMA, NHRA, SCCA, USAC, APBA, IMSA, NASCAR)? _____

6. Do you compete professionally? Yes No

7. How many races or events did you participate in over the last twelve months? _____

8. How many do you anticipate you will participate in over the next twelve months? _____

9. What is the average length of these events (in miles, laps, or time as appropriate)? _____

10. Over what type of course do you race (e.g., oval, simulated road)? _____

11. What is the average speed? _____ What is the top speed? _____

12. What type of safety equipment is used? _____

13. Have you ever been subject to discipline for any racing activity? _____

14. Do you anticipate any changes in your participation in the coming twelve months? If so, give details (different events, new class, etc.). _____

15. Please include any additional information which you feel is important concerning your sports activity.

