CPS **G** INSURANCE SERVICES

## **RACING QUESTIONNAIRE**

Dat	te of birth
Do you hold a competition drivers license from any organization? List all.	
Have you ever attended any type of driver's school? Which?	
How long have you participated in racing?	
Over what type of track or course do you race? (e.g., dirt oval, simulated road, off r	road, etc.)
Date of you last race.	Where?
How far do you travel to race?	
Have you ever competed, or do you intend to compete outside the U.S.?	Where?
Do you intend to enter a new class of competition? Please give details.	
Have you ever done, or do you intend to do any stunt driving?	
Is racing your full-time occupation? Yes No	
	Do you hold a competition drivers license from any organization? List all. Have you ever attended any type of driver's school? Which? How long have you participated in racing? Over what type of track or course do you race? (e.g., dirt oval, simulated road, off Date of you last race. How far do you travel to race? Have you ever competed, or do you intend to compete outside the U.S.? Do you intend to enter a new class of competition? Please give details. Have you ever done, or do you intend to do any stunt driving?

11. Do you compete on a traveling circuit? If so which?

12. Give particulars by types of races, and miles driven in competition, state "none" where none, as provided below:								
Types of races/ Sanctioning body*	Last 12 months		1-2 yrs ago		Contemplated next 12 months			
	No. of	Miles per	Max.	No. of races	Miles	No. of races	Miles	Max.
	races	race	speed					speed
			attained					expected
						•		

\* i.e. NASCAR LATE MODEL STOCK, IHRA FUNNY CAR, IMSA GT-T, STREET STOCK, etc.

13. Do you own a competition vehicle? ☐ Yes ☐ No	Make and Model	Displacement	Class
14. Do you have access to any other competition vehicle? ☐ Yes ☐ No	Make and Model	Displacement	Class

I represent that all statements and answers to the above questions are complete and true to the best of my knowledge and belief.

Signature of Proposed Insured	Date /		/
oignature of r roposed insured_		/	

Witness \_\_\_\_\_

Date\_

