

| Name:  |
|--|
| Date of Birth:   |
| Profession:  |
| Please check yes or no, provide explanation where needed   |
| 1. Do you have a criminal record? Yes No   |
| If Yes, please give full details.  |
| 2. Have you been convicted of driving under the influence of alcohol and/or drugs? Yes No  If Yes, please give full details. |
| 3. Have you been convicted of any drug and/or alcohol related offence(s)? Yes No  If Yes, please give full details.          |
| 4. Have you been convicted of any sex related offence(s)? Yes No  If Yes, please give full details.                          |
| 5. Have you ever been fined and/or suspended by a team and/or league? Yes No N/A  If Yes, please give full details.          |
| 6. Are you currently free of injury, sickness, disease or discomfort? Yes No   |
|  |



| 7. Are you currently p Yes No   | physically able to perform all of the duties required in y   | your sport/profession?     |
|---------------------------------|--|----------------------------|
| If NO, please give full detail  | ls.  |                            |
|                                 | in any of the following? Auto Racing, Motorcycle Ridi<br>), Jet-Skiing, Snowmobiling, Luging, Bobsledding, or Ma   |                            |
| If Yes, please give full detail | ls and how often.  |                            |
| recorded. Underwrite            | e that the above statements and answers are true and<br>ers at Lloyd's of London, and their designated repress<br>on this information in making their determination in | entatives at Pro Financial |
| Name: (please print)            |  |                            |
| Signature:                      |  |                            |
| Date:                           |  |                            |