

Full name:

1 For how many years have you been gliding?

2 Are you a member of a club?

YES / NO

If **YES**, please state which one

3 Which gliding certificate do you hold?

4 Are you an instructor?

YES / NO

5 Gliding completed to date - please give details of:

a Number of hours completed to date

b Number of launches to date

6 Intended gliding in future - please give details of:

a Number of hours you intend to do per annum

b Number of launches per annum

7 What type of glider do you fly? *ie unpowered, self-sustaining or self-launching*

8 Do you expect to participate in any form of competition flying or record attempts, or to carry out any prototype testing?

YES / NO

If **YES**, please give full details.

9 Have you been involved in any accident causing injury to yourself or significant damage to your aircraft?

YES / NO

If **YES**, please give full details.

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 or acceptance of this application.

I agree that this form will constitute part of my application for life assurance and that failure to disclose any material fact known to me may invalidate the contract.

Signature of applicant

Date
