

AEROBATICS QUESTIONNAIRE

(To be completed by the life insured)

1. Life insured's details

Policy no. _____ Identity no. _____
 Name of insured _____

2. Supplementary information required for aerobatic pilots

Please provide as much detail as possible in respect of each of the following aspects and attach it to the basic aviation questionnaire.

- a. Experience in aerobatics, i.e. how long have you been involved (total aerobatics hours)? _____
- b. Type(s) of aerobatic and other aircraft being flown. In particular, we need details on the actual aircraft being used for aerobatics.

- c. Are any competitions being flown, give full details

- d. Grade of aerobatics (sportsman, intermediate, advanced, unlimited) attained and currently maintained. Are you licenced to operate at shows?

- e. Details of any formation flying _____
- f. How many shows per annum? _____
- g. Aerobatic club membership _____
- h. Do you currently receive or give instruction? YES NO
 If YES, what is the type of instruction given/received and how many hours per year? _____
- i. Any history of incidents or accidents? YES NO
 If YES, supply details _____

Declaration by life insured

I declare that the statements above are true and complete and shall form part of my application for insurance and I declare that the statements together with my application shall be the basis of the contract between me and Hollard Life.

Please take note of the following important disclosures

Protection of Personal Information Act (POPIA)

Hollard cares about your privacy. In order to provide you with our service, we and our service providers have to process the personal information you provide us with by completing this form. We will treat this information with caution and we have put reasonable security measures in place to protect it.

Initials



Financial Intelligence Centre Amendment Act (FICAA)

In accordance with applicable anti-money laundering laws in South Africa, we are required to obtain specific information and evidence to verify your identify (and in many cases the identities of related persons, such as but not limited to directors, beneficial owners and persons instructing us on your behalf (where applicable)) when applying for cover and on an on-going basis. If we ask you for information or documents (including originals or certified copies) you must provide them to us as soon as possible. If we do not receive adequate information and evidence within a reasonable time of our request we may be unable to provide you with cover or may cancel the policy in accordance with applicable law.

Signature
(life insured) _____

Date

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