

BALLOONING/HANG GLIDING/ULTRALIGHT QUESTIONNAIRE (to be completed by Proposed Insured)

Name: _____ Application No.: _____

1. What is the nature of your participation to the sport? amateur professional instructor
2. Type of craft: Balloon Hang Glider Ultralight
3. Construction: Home Assembled Factory Assembled Home Built
 Parachute Motorized Not Motorized
4. Type of Flying: (a) Advertising (b) Instructing (c) Pleasure (d) Student (e) Carrying Passengers
 (f) Other (please provide details): _____

5. Please provide details below. If more than one type of flying, please indicate (a), (b), (c), etc., by referring to the above.

Date First Flight (dd/mmm/yyyy):	Date Last Flight (dd/mmm/yyyy):
Total Hours:	
Hours Last 12 Months:	Hours Next 12 Months
Average Height:	Greatest Height:
Average Distance:	Greatest Distance:
Average Duration:	Greatest Duration:

6. Do you belong to any clubs/associations? Yes No If yes, please provide details:

7. Have you ever had any accidents or mishaps? Yes No If yes, please provide details:

8. Do you currently hold a Transport Canada Pilot's Licence? Yes No
9. Describe required qualifications/licencing you have obtained in order to operate your craft:

10. Have you engaged in or do you intend to participate in any type of flying, ballooning or hang gliding not already indicated (e.g. record attempts, experimental equipment, over large bodies of water, remote terrain, outside North America)? Yes No
 If yes, please provide details:

11. Comments:

I declare that all answers to the questions in this questionnaire and statements made are true and complete and will form part of my application for insurance with BMO Life Assurance Company. I understand that if I do not completely and truthfully answer all of the questions, the company may void the policy.

Province Signed	Date (DD/MMM/YYYY)	Signature
		Proposed Insured X