## **Release Upon Cancellation by Policyholder**

Date:
Policyholder:
Policy Number:
Effective Date of Cancellation:
The undersigned holder of the above numbered policy hereby acknowledge the cancellation thereof and releases the Companies from all liability thereunder for an occurrence or occurrences arising out of accidents or events which happen from and after the effective date of cancellation stated above, provided, however, that the undersigned does not release the Companies for claims being reported after the effective date of the cancellation, if such claims are a result of an occurrence or occurrences happening after the policy inception and prior to the effective date of the policy's cancellation.
This release is given to "the participating member companies of the Canadian Aircraft Insurance Group which issued the above numbered policy through Canadian Aviation Insurance Managers, Ltd., Aviation Managers of the Companies.
Signature of Policyholder:
Title:
Witnessed by: