

Hazardous Sports

For Aviation, please use the Aviation Questionnaire.
For Sports Diving, please use the Diving Questionnaire.

Please complete all details.

Please answer the following questions fully and accurately to the best of your knowledge. Failure to provide complete and accurate information may affect the assessment and acceptance of any cover we offer or continue to offer. Please don't assume that we will obtain information from any other sources we may be in contact with.

Any information you provide will be kept in the strictest confidence and will form part of your insurance application.

Once you have completed the relevant section, please read and sign the Declaration at the end of this document. If you run out of space when writing your answers, please continue on a separate sheet of paper, make reference to it in the questionnaire and attach the extra sheets to this document.

Your details

Title Mr Mrs Miss Ms Other

Name in full
(as shown on ID card / passport)

Date of birth (dd/mm/yyyy)

Application number or reference (if known)

A. Motor sports

1. Do you participate in motor sports as:

a full-time occupation? Yes No

a part-time occupation? Yes No

a hobby? Yes No

2 a) How long have you held a competitions licence?

b) What type of licence do you hold?

3 a) In which countries do you currently compete or intend to compete?

Currently compete	Intend to compete
<input type="text"/>	<input type="text"/>

b) Are these FIA/ACU sanctioned events? Yes No

A. Motor sports (continued)

4 a) Please indicate which type of vehicle you drive and where indicated, show the appropriate class.

Type of car

Single seater

GT

Please state class e.g. (GT1/C1; GT2/C2)

Sports

Please state class e.g. (GT1/C1; GT2/C2)

Sports racing

Saloon

Please state class e.g. (Group A; N; Other)

Kart

Please state class e.g. (Long/Short circuit)

Other

Please give details

b) Please state make and model.

Motorcycle

Make

Model

5 What is the engine capacity, in litres?

6 What is the name of the category/ formula and championship that you compete in?

7 Please indicate the number and type of events.

a) Competed in past 12 months

Number

Type

b) Planned for next 12 months

Number

Type

c) Total to date

Number

Type

8 Do you engage, or intend to engage, in the:

a) Testing of vehicles in a different category to that in which you currently compete?

Yes No

If Yes, please give full details including type of vehicle.

b) Testing of prototype?

Yes No

c) Participation in record attempts?

Yes No

d) Any other form of motor sport?

Yes No

B. Powerboat racing

1 Do you take part in any of the following?

If Yes, please provide full details including class of boat, level of competition (club, national, international) and engine size.

a) Offshore racing

Yes No

b) Sportsboat/circuit racing

Yes No

c) Jet sprinting

Yes No

d) Drag racing

Yes No

e) Hydroplanes

Yes No

f) Record attempts

Yes No

g) Other powerboat racing

Yes No

2 When did you start Powerboat racing?

3 What licence do you hold and what clubs are you a member of?

4 Please indicate the number and types of events you take part in.

a) Competed in past 12 months

Number Type

b) Planned for next 12 months

Number Type

c) Total to date

Number Type

C. Hang gliding

(To include powered hang gliding, paragliding, parascending and microlight flying.)

1 To which hang gliding clubs and/or associations do you belong?

2 What type of hang glider do you use? State if it is approved by the British Hang Gliding and Paragliding Association (BHPA) or its equivalent.

3 a) Do you hold a BHPA (or equivalent) pilot rating for cross-country (or above)?

Yes No

If Yes, please provide organisations names.

b) Are you an instructor?

Yes No

If Yes, please provide organisations names.

4 How many flying hours have you got, in total?

Total to date Hours

In the last 12 months Hours

5 Within the next 12 months:

a) How frequently do you intend to fly?

b) How many hours do you intend to fly?

c) From which sites do you intend to fly?

6 Have you any intention of being towed by a vehicle, boat or aeroplane?

Yes No

If Yes, please give full details.

7 Have you any intention of making record attempts, or participating in competitions or exhibitions or engaging in aerobatics?

Yes No

If Yes, please give full details.

D. Caving

(To include potholing)

1 Are you a member of a club? Yes No

If Yes, please provide the name(s) of the club(s).

2 Is the club affiliated to any national regional body or association? Yes No

If Yes, please provide the name(s).

3 How long have you been caving? Years

4 Where do you go, or intend to go caving? Please name the country where it's located.

5 How many times do you go caving each year?

6 To what depths do you go caving?

7 Do you ever go caving alone? Yes No

8 Do you do cave or pothole diving? Yes No

If Yes, please give details of your qualifications, experience and frequency of dives.

9 Are you a member of a rescue team? Yes No

10 Do you engage in any underground excavation with or without the use of explosives? Yes No

If Yes, please give details.

E. Mountaineering and rock climbing

1 Where do you or are you likely to climb?

a) UK

Scotland

Elsewhere

Please specify

b) Alps (Europe)

c) Africa

d) Himalayas

e) North America

Mt McKinley

Elsewhere

Please specify

f) Other areas

Please specify

2 Do you plan to go on any expeditions in the next two years? Yes No

If Yes, please give details of area, length of expedition, frequency of trips, etc.

3 Please indicate the type of terrain.

Rock

Snow/Ice

Artificial climbing walls

4 What level of severity of climb do you attempt?

5 What is the maximum height you will climb to?

Below 4,000m

4,000–7,000m

Over 7,000m

6 Do you always follow routes protected by climbing bolts?

Yes No

7 How often do you climb?

8 a) Are you a member of a club?

Yes No

If Yes, please provide the name(s) of the club(s).

b) Is the club affiliated to any national or regional body or association?

Yes No

If Yes, please provide the name(s).

9 Do you ever climb solo?

Yes No

F. Parachuting

- 1 How many years have you been parachuting as a sport? Years
- 2 Are you a member of a club? Yes No
- If Yes, please provide the name(s) of the club(s).
- 3 Is the club affiliated to any national or regional body or association? Yes No
- If Yes, please provide the name(s).
- 4 How many jumps have you made to date?
- 5 How many jumps do you intend to make each year in the future? Static Line Free Fall
- 6 Do you, or are you likely to, take part in competitions or advanced exhibition jumping? Yes No
- If Yes, give full details.
- 7 In pursuit of this sport, please give the number of hours you fly each year and the type of aircraft.
- a) Club aircraft Hours Type
- b) Privately-owned aircraft Hours Type

G. Yachting

- 1 Do you compete at events? Yes No
- 2 Do you sail? Yes No
- If Yes, please give details of sailing areas.
- a) Inland only? Yes No
- b) Offshore? Yes No
- c) Trans Ocean? Yes No
- 3 Do you sail single-handed? Yes No
- If No, how many crew members are there?
- 4 If you take part in offshore yacht racing, under which of the following international classifications do you race:
- Category 1
Long distance races well away from shore. Vessels must be completely self-sufficient for extended periods, capable of withstanding heavy storms and prepared to meet serious emergencies without outside assistance.
- Category 2
Extended races along or close to the shoreline or in large unprotected bays or lakes. A high degree of self-sufficiency is required but with the reasonable probability of outside aid in a serious emergency.
- Category 3
Races across open water, most of which is relatively protected or close to the shoreline.
- Category 4
Short races close to the shore in protected waters.

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Declaration

I declare that the information given in this questionnaire is true and accurate in every respect.

I understand that this questionnaire will form part of my insurance application to Friends Provident International and failure to provide complete and accurate information may affect the assessment and acceptance of any cover Friends Provident International offers or continues to offer and could result in a policy being cancelled, its terms being amended, a claim being rejected or a reduction in any claim payment.

Signature

Date

I give explicit consent to capture and process my medical/lifestyle data.

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