

Activities questionnaire misc

(Martial arts, water ski racing, yachting/sailing, horse riding/dressage, white water rafting)

Application number:

Person to be Insured:

1) Please describe the activity:

If applicable please also provide the following information:

White water rafting – please advise maximum grade of river.

Yachting/Sailing, please advise:

(a) Do you race offshore?

 Yes No

(b) Do you race trans ocean?

 Yes No

Horse riding – please advise type of riding activity you are involved in.

2) Do you belong to a club, association or organisation in relation to this activity?

 Yes No

3) How long have you been doing this activity?

Years	Months
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4) How many times per year/hours per week do you participate in this activity?

5) Please provide details of your experience and/or qualification for this activity?

6) Have you ever sustained an injury as a result of participation in this activity?

 Yes No

If 'yes' please provide full details.

7) Geographical location. Where do you do this activity?

 Yes No

If 'yes' please provide full details.

8) Do you ever participate in this activity alone?

Yes No

If 'yes,' please provide details.

Four empty text input boxes for providing details.

9) How many competitions do you compete in each year?

Please provide details of competitions.

Four empty text input boxes for providing details of competitions.

10) Do you believe that any of the above details provided will change in the future?

Yes No

If 'yes,' please provide details.

Four empty text input boxes for providing details.

11) Since the date of your application have you suffered from any sickness or injury or had any reason to receive medical attention or advice?

Yes No

If 'yes,' please provide details.

Four empty text input boxes for providing details.

Your duty of disclosure (to be completed in all cases)

Please read carefully.

- 1) This questionnaire will form part of the application and together with the application, (declaration and any personal statement or telephone interview) shall be the basis of the proposed insurance contract.
- 2) The person insured and the policy owner must tell Asteron Life of any change in circumstances that is material to this application. This duty continues until the application is accepted and a policy document has been issued. This is important even if you have separately discussed something with your adviser. The duty of disclosure also applies if in

future there is a request to extend or alter the policy, or application to reinstate the policy after it has lapsed.

- 3) If the information provided to us is incomplete or incorrect in any material way, then we may decline the application or it may affect the ability to claim in future. If this happens, we may reduce claim benefits or decide not to accept a claim. We may also exercise any legal rights we have to cancel or avoid the policy from inception. Premiums paid may be forfeited and any claims already paid may have to be paid back.

I declare that the answers given above 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 have read and understood the duty of disclosure described above, and acknowledge it is my responsibility to ensure I have provided all material information whether that information has been specifically requested or not.

Signature of the Person to be Insured

Date

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Asteron Life

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