

Underwater diving questionnaire

Application number:

Person to be Insured:

1) Please advise what training you have received.

2) What diving qualifications do you hold and with what diving body are you affiliated (eg. PADI, NAUI)?

3) How long have you been diving?

4) Please advise the type of diving you engage or plan to engage in, diving locations and time of day you dive.

Type e.g. skin diving, scuba, hookah, high tech diving	Location e.g. close in shore, off shore, deep sea, dams, inland waters

5) Do you ever dive unaccompanied?

Yes No

If 'yes', please provide details including how often and in what circumstances.

6) Have you ever suffered from any sickness or injury as a result of your diving activities
e.g. blackout, decompression illness?

Yes No

If 'yes', please provide details.

7) Please provide details of diving undertaken in the last 12 months and diving you intend to engage in the future.

	Last 12 months	In the future
Number of dives per year		
Average duration of each dive		
Average depth		
Maximum depth		
Number of dives at maximum depth		
Number of dives > 30 metres		
Number of wreck dives		
Number of cave/pothole dives		

8) Is diving connected in any way to your occupation?

Yes No

If 'yes', please advise type of work, if explosives are used and number of divers involved.

9) When were you last medically examined for diving purposes?

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Please comment on any restrictions imposed.

10) 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.

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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