



**ABSEILING QUESTIONNAIRE**

*To be completed by the life proposed.*

Full name .....

1. How long have you been abseiling? .....

2. To date, how many hours abseiling in total? .....

3. Whereabouts do you abseil, commercially &/or recreationally, and what equipment do you use? .....

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4. Are you a member of any Association or an affiliated club? .....

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5. Do you expect to participate in national or international competitions? If so, please give full details.

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6. Do you expect to be involved in record attempts or prototype testing? If so, please give full details.

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7. Have you been involved in any abseiling accident causing injury to yourself or significant damage to property? If so, please give full details and approximate dates.

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I declare that the answers I have given 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 proposal.

I agree that this form will constitute part of my proposal for disability insurance and that failure to disclose any material fact known to me may invalidate the contract.

Signed ..... Dated .....