

IMPORTANT

Prior to completing this proposal please note that failure to disclose material information (i.e. information that would influence the acceptance of the risk and/or terms applied) could invalidate the Insurance. If you are in any doubt as to whether any information is material it should be disclosed.

PROPOSER

Full Name: _____

Quote / Policy Number: _____

Address: _____

Does the Person to be Insured engage in any of the following activities?

HAZARDOUS SPORTS

	YES Please tick and give details opposite	If so please give details such as – <ul style="list-style-type: none"> • experience and/or qualifications and if a member of a club • frequency of participation • participate solo or with a partner or instructor • where you undertake your sport/pastime, UK, Europe or Worldwide (please give details of country) • specialist events
Any professional sporting activity		
Aqualung Diving (Any form of swimming at a depth of 30 metres or more. Any form of swimming using breathing apparatus)		
Boxing		
Climbing using ropes (Mountaineering, abseiling or rock climbing requiring the use of ropes and/or guides)		
Flying (including hot-air ballooning, hang-gliding, gliding and micro-lighting) other than as a fare-paying passenger in a licensed passenger aircraft	If yes, please state which type and use separate pilots questionnaire	

HAZARDOUS SPORTS

	YES Please tick and give details opposite	If so please give details such as – <ul style="list-style-type: none"> • experience and/or qualifications and if a member of a club • frequency of participation • participate solo or with a partner or instructor • where you undertake your sport/pastime, UK, Europe or Worldwide (please give details of country) • specialist events
Football (Aussie Rules)		
Football (American)		
Hunting/Shooting (including drag hunting or clay pigeon shooting)		
Motorcycling (including motor tri-cycling and motor quadri-cycling whether as the rider or as a passenger)		
Motor Sports, rallies, competitions		
Parachuting		
Parasailing		
Parascending		
Pot Holing		
Rafting, canoeing or kayaking in white water rapids		

Declaration

I declare that to the best of my knowledge and belief the above statements and particulars are true and complete.

Signature: _____

Date: _____

**When complete please return this form to Groupama Personal Accident & Travel Underwriting,
Groupama House 24–26 Minories, London EC3N 1DE Tel (0870) 241 6182 Fax (0207) 264 2864
pa&travel.underwriting@groupama.co.uk**