

HAZARDOUS SPORTS AND ACTIVITIES QUESTIONNAIRE

Policy Number: _____
 Name: _____ Date of birth: _____

**Complete section A for powerboat, snowmobile, motorcycle or automobile racing.
 Complete section B for extreme snow skiing, mountaineering/climbing, parachuting/sky diving or ballooning/hang gliding/ultralight.**

SECTION A

Purpose: Pleasure Competition

Type of machine			
<u>Power boat</u> monohull hydroplane thunderboat twin hull speed boat jet boad	<u>Snowmobile</u> single seater two seater fast acceleration back country (complete H below)	<u>Motorcycle</u> touring cruising sports	<u>Automobile</u> all terrain dragsters dune / sand buggies go-carts sports other: _____
Type of race/ competition			
closed course straightaway offshore drag marathon timed speed trials inshore other: _____	oval course time speed snow cross trials cross country drag	cross country drag ice enduro hill climbs rally motocross road racing	auto crash closed circuit rallies demolition derby enduro speed trials off-road drag

- A) Are the races: Professional Club Sanctioned Non-Sanctioned
- B) Average speed: _____ Maximum Speed: _____
- C) Number of races in the last 12 months: _____
- D) Expected number of races in the next 12 months: _____
- E) Years of experience: _____
- F) Have you ever had a racing accident? _____
- G) Location of races: _____
- H) Back country snowmobiling: dates _____ ; location _____ ;
 frequency _____ ; future plans _____
- I) Additional comments: _____

 Date Signature of the person to be insured (parent of legal guardian if a minor)

SECTION B

Type of sport			
1) Extreme Snow Skiing			
A) Type:	back country skiing	freestyle or acrobatics	ski mountaineering
	<input type="checkbox"/> ski jumping	<input type="checkbox"/> other (please specify) _____	randonnee skiing
B) Frequency:	_____		
C) Dates and locations:	_____		
D) What are your plans for future extreme snow skiing activities?	_____		
2) Mountaineering and/or climbing			
A) Type:	trail	rock	snow
			ice
			glacier
B) Frequency:	_____		
C) Dates and locations:	_____		
D) Do you ever mountaineer / climb alone?	_____		
E) Geographical location:	_____		
F) Degree of difficulty:	easy	average	difficult
G) Highest climb :	_____		
H) What are your plans for future mountaineering and/or climbing activities?	_____		
3) Parachuting/Sky Diving			
A) Class of license held:	_____		
B) How many jumps have you logged?	_____		
C) Number of jumps in the last 12 months:	_____		
D) Expected number of jumps in the next 12 months:	_____		
E) Have you ever had a parachuting accident?	_____		
F) Do you jump professionally or use experimental equipment?	_____		
4) Ballooning/Hang Gliding/Ultralight			
A) Type of craft:	hot air balloon	hang glider	ultralight
B) Construction:	home assembled	factory assembled	rigid wings
	motorized	non-motorized	home-made
C) Type of flying:	advertising	instruction	student
	carrying passengers	pleasure	
D) Total hours flown:	_____		
E) Hours flown in last 12 months:	_____		
F) Expected hours in the next 12 months:	_____		
G) Average height:	_____	Greatest height:	_____
H) Average distance:	_____	Greatest distance:	_____
I) Average duration:	_____	Greatest duration:	_____
J) Type of terrain over which you fly:	_____		
K) Do you currently hold a DOT or FAA pilot's license?	Yes	No	
L) Have you ever had any accidents or mishaps?	Yes	No	
	(if yes, describe) _____		
M) Describe required qualifications/licensing obtained:	_____		

_____ Date _____ Signature of the person to be insured (parent of legal guardian if a minor)