

Hazardous sports and pastimes questionnaire

This statement should be completed by the applicant.

Application/policy number:

Full name:

Date of birth:

Please answer the following questions

1 What hazardous activity do you engage in?

2 Do you engage in this activity as an

Amateur

Semi Professional

Professional

Recreation only

3 Do you participate with a group or a club?

4 How long have you participated in this activity?

5 Where do you engage in this activity?

7 Please give details of any injuries sustained whilst engaging in this activity.

8 Please give details of difficulty or grading of your activity involved.

Declaration

I declare that the answers given are true and correct to the best of my knowledge and I agree that they shall form part of my application for insurance. I further declare that there has not been any change in my health, occupation or pastimes since completing my application for insurance.

Date:

Life Insured's Signature:

How to contact Macquarie

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