

Caving/Potholing questionnaire

To be completed by the insured person.

Please complete in BLOCK CAPITALS and in ballpoint pen.

1. Insured person's details

Policy/Reference number

Title

Mr / Mrs / Miss / Ms / Other – please specify

Full forename(s)

Surname

Date of birth (dd/mm/yyyy)

If you don't answer the questions fully and accurately, we may not pay a claim, and the whole policy may be cancelled, not just the benefit under which you're claiming.

2. Questions

2.1 How many times a year do you go caving/potholing?

2.2 Where do you go caving/potholing?

2.3 How long have you been caving/potholing?

2.4 Have you had any training?

No

Yes – give details

2.5 Are you an amateur or professional?

Only tick one box.

Amateur

Professional

2.6 Are you a member of any caving clubs?

No

Yes – give details

2.7 Do you ever cave or pothole alone?

No

Yes

2. Questions – continued

2.8 What grade of caving do you take part in?

2.9 Have you ever done, or do you intend to do, any of the following?

a. Single rope techniques

No

Yes – give details

b. Cave diving

No

Yes – please give the depths you descend to and also complete our Sports diving questionnaire

c. Digging or exploring new caves

No

Yes – give details

d. Exploring abandoned mines

No

Yes – give details

2.10 Have you ever been involved in a rescue?

No

Yes – give full details

3. Declaration

I acknowledge this questionnaire forms part of my application. To the best of my knowledge, the information and statements made in this questionnaire are true and complete. If the statements aren't true and complete and/or I don't tell Aegon about any changes before the policy starts, then it **might result in loss or cancellation of the protection**. I confirm that I've read over any answers that I didn't fill in and they're correct.

Date (dd/mm/yyyy)

Signature

 