

# Hazardous Activities: Mountaineering/Rock Climbing/ Trekking

**i** Important information

Please remember that all the information requested in this questionnaire is taken into account when assessing acceptance of the application and in calculating the premium. If you do not give any of this information or if you misstate any information, it may mean that a claim is not paid or the policy is amended or cancelled.

Where examples are shown, they are not intended to be a complete list.

Name

Title  Initials  Surname

Date of Birth

Application Number/Reference

**1** Which of the following do you take part in? (please tick)

Trekking/Hill Climbing/Tramping/Abseiling at an altitude of 5,000m or higher

Trekking/Hill Climbing/Tramping/Abseiling always below an altitude of 5,000m

Mountaineering/Rock climbing

If you ticked Mountaineering/Rock climbing please continue to question 2, otherwise please go straight to the Declaration at the end of the form.

**2** Are your activities limited to using artificial climbing walls, adventure or climbing parks?

Yes  No

If 'No' please continue to question 3, otherwise please go straight to the Declaration at the end of the form.

**3** For how many years have you been climbing regularly?

Years

**4** Do you belong to any recognised mountaineering organisation (e.g. British Mountaineering Council)?

Yes  No

**5** Are your activities limited to climbing on bolted routes only?

Yes  No

**6a** Do you always climb **below** UIAA (Union Internationale des Associations d'Alpinisme) level 5 or **below** UK classification – very severe or technical grade 4b?

Yes  If 'Yes', please go straight to question 7.

No  If 'No', please go to question 6b.

**6b** Was your past or will your future climbing always be below 4,000m?

Yes  If 'Yes', please go straight to question 7.

No  If 'No', please go to question 6c.

**6c** Where you have climbed or will possibly be climbing in the future? (tick all that apply)

	Past		How often?	Future		How often?
	Yes	No		Yes	No	
i) Africa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
ii) Europe – Alps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
iii) Europe – Elsewhere	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
iv) North America – Alaska Range – Denali	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
North America – Alaska Range – Elsewhere	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
North America – Elsewhere	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
v) Andes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
vi) Antarctica	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
vii) Elsewhere – between 4,000m and 7,000m	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
viii) Elsewhere – over 7,000m e.g. Everest, K2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

**7** Do you use additional assisting tools in your descent (kites, paraglider, skis, snowboard etc)?

Yes  No

If yes, please give details.

**8** Do you ever:

a) Climb alone? Yes  No

b) Climb without the use of ropes or other specialist equipment? Yes  No

c) Ice Climb (Secured)? Yes  No

d) Ice Climb (Unsecured)? Yes  No

e) Speed Climb? Yes  No

f) Go caving or potholing? Yes  No

If you have answered 'Yes' to any part of question 8, please give full details.

How often

continues

8 continued

Location(s)

Degree of difficulty

9 If you have any further information not covered by the previous questions please provide it here.

**CUSTOMER DECLARATION**

By accepting this:

- I agree that the information given in this questionnaire has been provided truthfully and accurately.
- I agree that this questionnaire will form part of my application and the information provided here will be used for assessing my application and any subsequent claim.
- I am aware that the information provided will form part of the legal relationship between us and if any of it is found to be incorrect/missing it may mean that a claim is not paid or the policy is amended or cancelled.
- I will immediately inform Legal & General if there are any changes to any answers given on the questionnaire before the policy starts.

Signature

Date

# Contact us

 [legalandgeneral.com](http://legalandgeneral.com)

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Registered in England and Wales No. 166055.  
Registered office: One Coleman Street, London EC2R 5AA

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