

## Mountain Climbing Questionnaire

|                           |  |
|---------------------------|--|
| Name of the Life Insured: |  |
| Proposal Number:          |  |

Please give full and accurate answers to each question;

1. For how many years have you been climbing regularly ? \_\_\_\_\_
2. How often do you climb ? \_\_\_\_\_
3. How high do you climb on an average? (in meters) \_\_\_\_\_
4. What is the highest point have you ever climbed to? \_\_\_\_\_
5. In which areas do you climb? (If mountain ranges, please specify, E.g. if Sahyadri, Himalayas etc) \_\_\_\_\_
6. Do you possess any professional qualification, licenses or formal training wrt mountain climbing, give details  
\_\_\_\_\_
7. Nature of climbing \_\_\_\_\_
8. Type of terrain eg. Rock, snow/ice, artificial climbing walls: \_\_\_\_\_
9. Degree of difficulty i.e easy, moderate, difficult, severe: \_\_\_\_\_
10. Do you Climb glacier? Yes ☐ No ☐  
If 'Yes', no. of times you climb per year: \_\_\_\_\_
11. Do you climb solo? Yes ☐ No ☐  
If 'Yes', no. of times you climb per year: \_\_\_\_\_
12. During which seasons do you climb? ☐ Spring ☐ Summer ☐ Winter
13. Are you a member of a club? Yes ☐ No ☐  
If 'Yes', please provide the following details :  
- Is the club registered? Yes ☐ No ☐  
If 'Yes', please provide the Regn No. \_\_\_\_\_  
- Name and address of the club ? \_\_\_\_\_
14. Do you ever climb alone? Yes ☐ No ☐
15. Length of average climbs: \_\_\_\_\_ hrs \_\_\_\_\_ day(s)
16. Maximum height climbed to: \_\_\_\_\_
17. Do you, or do you intend to do Alpine climbing? Yes ☐ No ☐
18. What altitudes? \_\_\_\_\_ No. of years \_\_\_\_\_
19. What precautionary measures are available with you while climbing? \_\_\_\_\_
20. Have you ever suffered from any injury/adverse health condition while climbing? (like breathlessness, pulmonary edema, blood pressure etc.) Yes ☐ No ☐  
If 'Yes', please specify. \_\_\_\_\_
21. Have you ever been restricted from climbing by any of the physician? Yes ☐ No ☐  
If 'Yes', please provide the details. \_\_\_\_\_
22. Do you plan to go for any major expeditions in the next 2 years ? Yes ☐ No ☐  
If 'Yes', please give full details, including area, length of expedition and frequency of trips. \_\_\_\_\_

I hereby declare that the answers I have given are, to the best of my knowledge, true and that I have not withheld any material information that may influence the assessment or acceptance of this application.

I hereby agree that the foregoing questions and answers shall form part of the proposal for insurance made by me to the company.

Place : \_\_\_\_\_ Date : \_\_\_\_\_

\_\_\_\_\_  
Signature of Life Insured

Vernacular declaration: I have explained the contents of this form and have read out the responses to the Life Insured in his/her local language. He/she has confirmed that the contents are fully understood by him/her.

Name of the Declarant: \_\_\_\_\_

Address of the Declarant: \_\_\_\_\_

\_\_\_\_\_  
Signature of the Declarant

Place: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of the Life Insured