

## Sports and Pastimes questionnaire

Reference No.

Name of life to be insured

Date of birth  /  /  (DD/MM/YYYY)

Complete sections of this form as appropriate to your circumstances

### SCUBA OR SKIN DIVING

- Are you a current certified diver?  Yes  No
- How many individual dives do you go on per annum?
- What are the maximum depths of your dives?  metres
- Do you use explosives while diving?  Yes  No
- Do you dive unaccompanied or dive in wrecks, pits, caves or potholes or dive at night or altitude or do mixed gas or decompression diving?  Yes  No
- Do you intend to change the scope of your diving activities?  Yes  No
- If you have answered yes to any of the questions above, please provide any further information you think may assist in underwriting your application.

  

### SPORTS (CAR, BIKE, BOAT)

- Please specify the type of motorsport and type of vehicle and License held:

Engine size

Maximum speed

Times per annum

Period

Type of competition:

Amateur

Professional

## SPORTS (CAR, BIKE, BOAT) CONTINUED

9. Please specify the type of events and categories of racing:

10. Do you take part in international events? If yes, please provide details.

Yes  No

  

## AVIATION ACTIVITIES

11. Do you hold a pilot's licence?

Yes  No

12. Do you intend to change the scope of your present licence?

Yes  No

13. Have you ever had an accident or been charged with a violation of Department of Transport regulations?

Yes  No

14. Do you land at unauthorised aerodomes, airports or landing areas?

Yes  No

15. Please indicate the type of aircraft that you fly:

Fixed wing

Glider

Other

Helicopter

Balloon

Ultralight / Microlight

Hang-glider / paraglider

16. How many hours do you fly or expect to fly per annum?

 hours

17. Do you take part in stunt flying/aerobatics/competitions or record attempts?

Yes  No

18. If you have answered yes to any of the questions above, please provide any further information you think may assist in underwriting your application.

  

## OTHER ACTIVITIES (E.G. FOOTBALL, ROCKCLIMBING, ABSEILING, CAVING, BUNGEE JUMPING)

19. Please specify the type of activity and events participated in:

20. Please specify:

Times participated in per year

Type of competition:

Location (e.g. indoor, outdoor, overseas, etc.)

Amateur

Contact or non-contact

Professional

## OTHER ACTIVITIES (E.G. FOOTBALL, ROCKCLIMBING, ABSEILING, CAVING, BUNGEE JUMPING) CONTINUED

21. Please specify:

A. Equipment used:

B. Heights and/or depths involved:

22. Do you have any other information you think may assist in underwriting your application?

  
  

## YOUR DUTY OF DISCLOSURE

Before you enter into or become insured under a contract of insurance with TOWER Australia Limited (ABN 70 050 109 450) (TOWER), you and any life to be insured have a duty, under the Insurance Contracts Act 1984, to inform TOWER of every matter that you or any life to be insured know, or could reasonably be expected to know, is relevant to TOWER's decision whether to accept the risk of insurance and, if so, on what terms. You have the same duty to disclose those matters to TOWER before you extend, vary or reinstate a contract of insurance. Your duty however does not require disclosure of a matter that reduces TOWER's risk, is common knowledge, that TOWER knows or ought to know in the ordinary course of business, or as to which compliance with your duty is waived. Your duty of disclosure applies even after this Application is completed until TOWER advises acceptance of insurance. If you or any life to be insured fail to comply with your duty of disclosure and, if the failure had not occurred, TOWER would not have entered into the contract on any terms, TOWER may avoid the contract within three years of entering into it. If your non-disclosure is fraudulent, TOWER may avoid the contract at any time. Instead of avoiding the contract TOWER may, within three years of entering into it, reduce the sum insured in accordance with a formula that takes into account the premium that would have been payable if you had disclosed all relevant matters to TOWER.

## PRIVACY STATEMENT

Privacy laws are designed to protect the privacy of individuals. The way in which we collect, use, disclose and handle your information is described in the TOWER Privacy Policy available at [www.toweraustralia.com.au](http://www.toweraustralia.com.au). If you have any questions regarding your privacy or would like to obtain a copy of our Privacy Policy please contact our Privacy Officer.

Please be aware that whenever you provide information to us, the duty of disclosure explained in the insurance documentation applies. If you fail to comply with the duty of disclosure TOWER may be entitled to cancel or avoid the insurance policy. Full details about the duty of disclosure are contained in the Product Disclosure Statement.

## DECLARATION

I understand and acknowledge that I am bound by the Duty of Disclosure. I declare that the foregoing answers are true and complete and I agree that this Declaration shall be held to form part of the application for insurance on my life now made to the Company.

Signature of  
life to be insured

Date

Please return the completed form to:

**TOWER Australia Limited**, PO Box 142, Milsons Point NSW 1565, 80 Alfred Street, Milsons Point NSW 2061

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**Email:** [groupriskadmin@toweraustralia.com.au](mailto:groupriskadmin@toweraustralia.com.au) **www.toweraustralia.com.au**