



HERMANN SONS LIFE

Sport, Amusement or Avocation Questionnaire

DO NOT USE FOR AVIATION
TO BE COMPLETED BY APPLICANT
PLEASE PRINT IN BLUE OR BLACK INK ONLY IF FILLING OUT BY HAND

Name _____ Date of Birth _____

- | | | | |
|--------------------------------------|--|---|--|
| <input type="checkbox"/> Auto racing | <input type="checkbox"/> Ballooning | <input type="checkbox"/> Parachuting | <input type="checkbox"/> Snowmobile racing |
| <input type="checkbox"/> Boat racing | <input type="checkbox"/> Hang gliding | <input type="checkbox"/> Professional athletics | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Boxing | <input type="checkbox"/> Motorcycle racing | <input type="checkbox"/> Scuba or skin diving | _____ |

1. What national clubs or associations are you affiliated with in connection with this activity?

2. List any special licenses, professional or amateur titles you hold in connection with this activity?

3. Do you participate for monetary gain or profit? Yes No Earnings in last 12 months? _____
4. In what geographical locations do you normally participate in this sport or avocation? (i.e. type of track or body of water, etc.) _____
5. Do you or have you ever participated in any experimental forms of this sport or avocation? Yes No
If "yes," give details:

6. How long have you been participating in this sport or avocation? _____
7. Frequency of participation: 1-2 years ago _____ Past 12 months _____ Next 12 months _____
8. What is the greatest height-depth-speed you have attained? _____
9. How many times have you attained this height-depth-speed? Total _____ Last 12 months _____
10. What is the average height-depth-speed? _____
11. What is the average length of time you spend in each instance of participation in this activity? _____
12. The following questions are to be answered by those participating in motor sports:

a. Type of motor sport? _____	e. What HP? _____
b. Make and model of vehicle? _____	f. Engine displacement? _____
c. Is it modified? _____	g. Type of fuel? _____
d. Class? _____	h. Estimated top speed? _____
13. The following questions are to be answered by those participating in scuba and other diving activities:

a. What equipment do you use? _____	
b. Do you own this equipment? <input type="checkbox"/> Yes <input type="checkbox"/> No	c. Do you dive alone? <input type="checkbox"/> Yes <input type="checkbox"/> No
14. Would you prefer this policy to be issued with extra premium (if necessary) or exclusion rider (if possible)?

I agree that all statements and answers to the above questions are complete and true to the best of my knowledge and belief, and I agree that they will be a part of the application for issue, reinstatement or change of a policy of insurance on my life.

Signature of the Proposed Insured _____ Date _____

Signature of Witness _____