

## QUESTIONNAIRE

### FOR PERSONAL CHANGES – CHANGE OF SPORTS ACTIVITY

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Please complete this questionnaire if you're paying an increased premium due to a sports activity and you've now given this up, and would like us to consider whether we can reduce your premium.

Please take care when answering the questions to make sure they're accurate, true and complete. If not, you risk your cover being cancelled or when we assess a claim you risk us paying a reduced amount or nothing at all.

**Your name:**

**Policy number(s)**

**Cover reference(s)**

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#### Please answer the following questions

1. Which hazardous sports activity or activities were you taking part in when you applied for this policy?

2. When did you stop taking part in this or these sports activities?

3. In future, do you intend to resume the sports activity or activities that you were doing when you applied for this policy?

☐ Yes ☐ No

**Declaration**

I confirm that the answers I've given are accurate to the best of my knowledge and belief and I understand that if they're not:

- You may reduce the amount you pay on any claim or not make any payout at all.
- You may amend the terms of my cover.
- You may cancel my policy completely.
- Where you cancel my policy, you may not refund the premiums I've paid.

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Signature:

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Date: