
MOUNTAINEERING QUESTIONNAIRE (to be completed by Proposed Insured)

Name: _____ Application No.: _____

1. Type(s) of climbing: Trail Rock Snow Ice Glacier Other (explain): _____

2. Frequency of each: _____

3. Date and location of last climb: _____

4. How long have you been climbing: _____

5. What courses have you taken and year(s)? _____

6. Do you ever climb alone? Yes No

If no, how many others would you normally climb with and what would be their experience?

If yes, please provide details:

7. Name geographical location(s) where you climb, type of climbing and classify as easy, moderate or severe:

8. Time of year you climb: _____

9. List the equipments you normally carry:

10. How many hours/days would your average climb be, average heights, and average degree of difficulty?

11. Your highest climb and date? _____

12. What are your future goals regarding climbing?

13. If you climb outside your home area, do you climb with local guides? Yes No

14. Additional comments:

I hereby agree that the foregoing questions and answers shall form part of the application for insurance made by me to BMO Life Assurance Company on the _____ day of _____ 20 ____ ; and they shall be of the same effect as if contained in the original application.

Dated at _____ this _____ of _____ 20 _____

Witness

Proposed Insured