

## Horse Riding & Associated Risks - Public Liability Questionnaire

Contact person \_\_\_\_\_

Postal address \_\_\_\_\_

Phone number \_\_\_\_\_ Fax number \_\_\_\_\_

Email address \_\_\_\_\_

Web Site \_\_\_\_\_

Please indicate (with a tick) how you would prefer to be contacted

- Email
- Fax
- Post

Insured Name \_\_\_\_\_

Please tick & complete the appropriate activities undertaken and the percentage it relates to overall annual revenues:

- |                              |         |
|------------------------------|---------|
| Hand led pony rides          | _____ % |
| Riding Tuition               | _____ % |
| Camel Rides                  | _____ % |
| Agistment / Breeding         | _____ % |
| Property Owners Only         | _____ % |
| All other Trail Riding       | _____ % |
| Gymkhana                     | _____ % |
| Horse Training / Breaking    | _____ % |
| Horse Drawn Carriages        | _____ % |
| Rodeo and other 1 day events | _____ % |

Other Activities:-

Describe all other activities associated with the Business, ie: Camping, Accommodation.

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**In respect of Trail Riding:**

1. Maximum Number of Horses used in any one Trail Ride? \_\_\_\_\_
2. Number of Trail Rides per week? \_\_\_\_\_

**In respect of Riding Tuition:**

1. Estimated Number of Students per week? \_\_\_\_\_
2. Number of Students at any one time? \_\_\_\_\_
3. Number of Instructors? \_\_\_\_\_

**Tuition Details:**

1. Type of tuition provided? \_\_\_\_\_
2. Minimum age of students: \_\_\_\_\_
3. Do you provide tuition to beginners? \_\_\_\_\_

How many years has your current business been in operation? \_\_\_\_\_

Please provide details of your experience and any formal qualifications:

\_\_\_\_\_  
\_\_\_\_\_

Do you conduct regular inspection and maintenance of helmets, saddles, and other riding equipment? \_\_\_\_\_

If YES, how often? \_\_\_\_\_

What do you do to ensure a rider is matched to a horse suitable to their experience & skill?

\_\_\_\_\_  
\_\_\_\_\_

Do you provide: Food and/ or Beverages? \_\_\_\_\_

Alcohol? \_\_\_\_\_

Do you use Disclaimers? \_\_\_\_\_

If YES, please attach a copy of your disclaimer

Limit Of Liability: (circle)                      \$5,000,000                      \$10,000,000                      \$20,000,000

Is Errors & Omissions extension required? \_\_\_\_\_

If Yes, what limit is required? (circle)                      \$1,000,000                      \$2,000,000

Annual Dollar Turnover: \_\_\_\_\_

Annual Dollar Wage Roll: \_\_\_\_\_

What cover do you require for property of others in your Care Custody and Control?

Per Horse: \_\_\_\_\_

Total Value of All Horses: \_\_\_\_\_

Other (specify): \_\_\_\_\_

Are subcontractors used? \_\_\_\_\_

NOTE: If we offer you the Insurance policy there will not be any cover for all sub-contractors and Service Providers.

#### DECLARATION

I/We hereby declare that the information provided by me/we in this questionnaire is true and correct and that I/we have read and understand the Important Notices at the start of this questionnaire. I/We also agree that this questionnaire can be used as the proposal of insurance and therefore the basis of the contract of insurance between me/we and the underwriter, if so approved by the underwriter.

\_\_\_\_\_  
**(Signature)**

\_\_\_\_\_  
**(Date)**

\_\_\_\_\_  
**(Name)**

\_\_\_\_\_  
**(Position)**