

Equisure, Inc.

3000 S. Jamaica Ct, Suite 210

Aurora, CO 80014

1-800-752-2472 * 303-614-6961 * FAX 303-614-6967

www.equisure-inc.com

No Obligation Mortality/Major Medical Quote Fax or Mail this form **TODAY** for an immediate quote!

Date: _____

Name: _____

State: _____ *This product is NOT available in Kentucky or Illinois or for horses 15 years or older*

Association Membership: Y N If Yes, please indicate which one? _____

Do you currently have insurance coverage? Y N

If so when does it expire? (mo/day/yr) _____

When do you need coverage to begin? (mo/day/yr) _____

Horse #1:

Age: _____ Breed: _____

Value: _____ Pick Optional Coverage # Below: _____

Use - Please circle one: Pleasure, Hunter/Jumper, Flat, Dressage, Endurance,
Breeding, Combined Training, Polo, Team Roping,
Barrel Racing, Driving

Horse #2:

Age: _____ Breed: _____

Value: _____ Pick Optional Coverage # Below: _____

Use - Please circle one: Pleasure, Hunter/Jumper, Flat, Dressage, Endurance,
Breeding, Combined Training, Polo, Team Roping,
Barrel Racing, Driving

Optional Coverage's: Please pick the Option you wish to have quoted.

Major Medical: Option #1 - \$250 deductible + 20% co-pay

Option #2 - \$500 deductible + no co-pay

Includes reasonable & customary veterinary medical and surgical care, not associated with maintenance.

Emergency/Surgical: Option #3 - \$7,500 – No deductible

Option #4 - \$2,500 – No deductible

Reimbursement of reasonable & customary fees for life saving surgical procedures (including after care).

All coverage's are subject to policy limits, conditions and exclusions.

What is the best way to reach you?

Phone (home): _____ Phone (work): _____

Fax: _____

Mailing Address: _____ City _____ State _____ ZIP _____

Email Address: _____

When is the best time to call you? _____

FAX TO: 303-614-6967 Today!

Duplicate as needed for additional horses. USEF 2006