

Pet insurance:

Prepare for your quote

Usdan Institute
for Animal
Health Education

AMC
— SINCE 1910 —
ANIMAL MEDICAL CENTER

amcnny.org/usdaninstitute

Save time by gathering the information you'll
need when applying for quotes online or by phone.

Keep this completed sheet with you as a reference when you apply!

1. PET'S NAME: _____

2. DATE OF BIRTH: / /

3. AGE: _____

4. SEX: ☐ Male ☐ Female

5. TYPE OF PET: ☐ Dog ☐ Cat ☐ Exotic

6. IS YOUR PET PUREBRED OR MIXED BREED? ☐ Purebred ☐ Mixed

7. PET'S BREED: _____

8. IS YOUR PET SPAYED OR NEUTERED? ☐ Yes ☐ No

9. DOES YOUR PET HAVE ANY PRE-EXISTING CONDITIONS? ☐ Yes ☐ No

If yes, list _____

10. DOES YOUR PET HAVE A MICROCHIP? ☐ Yes ☐ No

If yes, microchip number: _____

**11. HAS YOUR PET HAD A VETERINARY EXAM
IN THE PAST 12 MONTHS?** ☐ Yes ☐ No

12. WHAT TYPE OF COVERAGE ARE YOU SEEKING?

☐ Emergency-only ☐ Complete ☐ Wellness/Preventive Care

13. WHAT IS YOUR MONTHLY BUDGET?

☐ <\$50 ☐ \$50-75 ☐ \$76-100 ☐ \$101-125 ☐ \$126+