

The following enrollment form gives us the information needed to run your rates and quotes properly. Do not try to run your own rates online without the help of a licensed professional agent. Online websites always give you the cheapest teaser rate to get you to call them and then when they run your medical information more times than not it gives you much higher rates. this form gives us the info to run your rates right from the beginning. In conclusion, a licensed professional insurance agent (guide) will contact you within 24 hours of submitting this form.

## **Insurance Enrollment Intake Form (Our Client's Defense)**

### **Name**

Client \_\_\_\_\_

Spouse \_\_\_\_\_

Children \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **Address**

Home \_\_\_\_\_

\_\_\_\_\_

Business \_\_\_\_\_

\_\_\_\_\_

**D/O/B**

Client\_\_\_\_\_

Spouse\_\_\_\_\_

Children (Please List Oldest Child First)

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

**Contact Info**

Email\_\_\_\_\_

Home Phone\_\_\_\_\_

Business Phone\_\_\_\_\_

Cell Phone\_\_\_\_\_

Fax#\_\_\_\_\_

**Smoker/Nonsmoker (Y/N)**

Client\_\_\_\_\_

Spouse\_\_\_\_\_

Child (Please List Name)\_\_\_\_\_

Child (Please List Name)\_\_\_\_\_

Child (Please List Name)\_\_\_\_\_

Child (Please List Name)\_\_\_\_\_

Child (Please List Name)\_\_\_\_\_

