

## Request for quote

## **Disability Insurance**



Disability income insurance is one of the most overlooked products in the entire insurance industry. MDA Insurance can show you how to easily fill that gap and protect yourself if a disability occurs. Disability coverage can be purchased individually or it can be set up as a group plan. To receive your free, no-obligation quote, please complete this form and return to MDA Insurance. Requests for quotes can be submitted online at mdaprograms.com. If you prefer, you may contact us at 877.906.9924.

My information			
First name		Last name	
Home address (please include city, state and ZIP)			
Practice address (please include city, state and ZIP)			
Are you currently working with an MDA Insurance agent?  ¬ No ¬ Yes:			
I would like to receive my quote by:			
□ Phone	□ Email		
☐ Personal Appointment ☐ Mail			
Date of birth / /	Height:	Occupation:	
□ Male □ Female	Weight:	Annual Gross	Income: \$
Health information			
1. Is there anything significant about your	health history? 🖵 No	☐ Yes (if yes, please expl	ain below)
2. Do you take any medications? • No • Yes (if yes, please provide name, dosage and frequency):			
3. Have you ever taken an antidepressar	t medication or receive	ed professional counseling?	□ No □ Yes (if yes, please explain below)
4. Are there any citations on your driving record? • No • Yes (if yes, please explain below)			

Thank you for completing and returning this data sheet and for requesting a proposal! You should expect to receive your quote in the next couple of days. If you have questions in the meantime, call us toll-free at 800-860-2272.