

ADD-A-PET FORM

PLEASE COMPLETE THE FORM IN FULL (* REQUIRED FIELDS)

EMAIL TO: membership@petsure.co.za or Fax: 086 661 0990

REQUIRED INFORMATION FULL NAME : Mr/Mrs/Miss/Ms _____ EMAIL ADDRESS : _____	CELL No: _____ POLICY No: _____
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Add New Pets Only	PET No: 1	PET No: 2	PET No: 3	PET No: 4
PETS NAME				
DOG / CAT				
BREED				
COLOUR				
BIRTH DATE				
SEX (Male / Female)				
STERILISED (Spayed/ Neutered)				
Any veterinary treatment other than vaccinations (Yes/No) **				
Has the pet been treated in the last 12 months (Yes/No) **				
Date of the last vaccination The insured animal(s) should have a current vaccination				
Select Product: Prime Choice or Smart Choice				
Would you like to add Routine and Dental Care? This is an add-on option (Yes/No)				

**** IF YES, PLEASE STATE BELOW OR GIVE DETAILS ON A SEPARATE SHEET OF PAPER**

I authorise any Veterinary Surgeon who has treated my pet to provide the Insurer with any details regarding my pet's health they may require.

Name of Veterinary Practice where pet(s) were seen: _____ **Tel No:** _____

I understand that pre-existing conditions will result in temporary or permanent exclusions. Hereditary and congenital conditions are considered for payment provided there were no clinical signs during the first 18 months of cover. Please read the Policy Document for further details.

I warrant that all the particulars and statements above are true and correct, and contain all the information known to me affecting the risks under the Sections to be insured. I understand that these statements and particulars, and any other statement, written or oral, for the purpose of the proposed insurance shall be the basis of, and incorporated in, the contract between myself and PetSure / The Hollard Insurance Company Limited.

Acceptance of this insurance for any pet is at the discretion of the underwriters. We reserve the right to decline acceptance of a pet, to vary the conditions on which the insurance is accepted and to vary the conditions and premiums at any time. Before completing the Add-a-pet Form please ensure that you have familiarised yourself with our Hollard Pet Insurance Policy Document and the Terms and Conditions which can be found in the information provided on our website www.hollardpetinsurance.co.za By completing and signing the Add-a-pet Form you will be agreeing to Hollard Pet Insurance's Terms and Conditions.

Policyholder's Signature: _____ **Date:** _____