



# Church & Casualty

INSURANCE AGENCY

CHURCH MUTUAL'S CALIFORNIA REPRESENTATIVE

## CHURCH & CASUALTY INSURANCE AGENCY

### MEDICAL CENSUS FORM

FAX TOLL FREE TO 1-800-995-7521

CONTACT NAME: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_

CITY/ZIP: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_

CURRENT PLAN: \_\_\_\_\_

PREMIUM: \_\_\_\_\_

DESIRED EFF RATE: \_\_\_\_\_

FT EMPLOYEES (#): \_\_\_\_\_

MORE THAN ONE LOCATION?: YES / NO

ANY EMPLOYEES LIVING OUT OF STATE?: YES / NO

NAME	SEX	DOB	SPOUSE	# CHILDREN	HOME ZIP
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					