

DECLARATION

I, Dr. aged years, Annual/Life member of IMA, do hereby declare that I will implicitly abide by the Rules and Bye-laws of Social Security Scheme in force, as amended from time to time. **I declare that I am not suffering from any terminal illness.** I declare that I am a Current member of IMA branch and that I am having continuous membership in IMA since the year

Enclosed herewith DD/Cheque/Chalan/NEFT Receipt for Rs. I understand that my enrolment to the scheme will be effective only after realization of the DD/Cheque and issue of policy document. I do declare that the above statements are true and that I have not withheld any information whatsoever regarding the application. I agree to pay in future the amount demanded as per the constitution of the scheme.

Payment by: DD Cheque Core banking NEFT

DD/Cheque No. date Bank & Branch

Date of application

Name of the promoter Signature of the applicant

Certificate from the Branch Secretary / President

I, Dr. Secretary / President of IMA Branch do hereby certify that Dr. is a current Annual/Life member of IMA Branch and that he/she is having continuous membership in IMA since (year)

Date (Branch seal) Signature of IMA Branch Secretary/President

a Ordinary Membership

A. Admission fee:

- 1. Member below the age of 30 years Rs. 1,000
- 2. 30 years & above but below 40 years Rs. 1,500
- 3. 40 years & above but below 45 years Rs. 2,000
- 4. 45 years & above but below 50 years Rs. 2,500
- 5. 50 years & above but below 55 years Rs. 3,000

Admission fee once paid will not be refunded

- B. Annual Subscription** Rs. 300

Total amount payable at admission: A + B

a Life Membership

Only Life members of IMA are eligible. One time Non-refundable payment of Rs. 2 Lakhs

a Eligibility of membership

Any Member of IMA Kerala State Branch below the age of 55 Years on the day of joining. Additionally, for the membership in the Scheme, life membership in IMA at the time of joining is mandatory

IV. Future Yearly Payment (for 20 Years only) for ordinary members with last date **28th February** and a fine of **Rs.25/-** per month thereafter .

- 1. Annual Subscription **Rs.300/-**
- 2. Fraternity contribution Rs. 200/- per death subject maximum 50 deaths per year.
- V. Annual IMA members has to renew the membership Yearly in time, to safe guard the SS Scheme rights.
- VI. Fraternity benefit will be paid only if the member has completed one year from the date of joining the scheme if below 50, and those Who above 50 must be completed 2 years.

DD/Cheque drawn in favor of "Social Security Scheme I, IMA Kerala State Branch" and payable at Thiruvananthapuram.

Self attested copies of documents to be attached:

- 1. Age proving document
- 2. IMA Life Member Certificate for Life membership in the Scheme

Send completed proforma, and payments to:

Dr. Prasanth. C. V.
 Hon. Secretary
 IMA Kerala State Branch, Head Quarters
 Thiruvananthapuram -695029
 Contact: Office: 0471- 2741244
 E-mail: sssimaksb@gmail.com

For Office use only

Date of application
 Date of receiving
 Date of enrolment

Receipt No.
 Dated
 Policy sent on

Verification from IMA HQ
 Life Annual Non-Member

Signature Secretary SSS IMA KSB