



I.M.A. NATIONAL SOCIAL SECURITY SCHEME

2nd Floor, A.M.A. House, Opp. H.K. College,
Ashram Road, Ahmedabad-380009.(Gujarat)

Phone/Fax : (079) 2658 5430

Time : 2.00 p.m. to 6.30 p.m.

E-mail : imansss1@gmail.com

imansss@vsnl.net

Website : www.imansss.org

FOR OFFICE USE

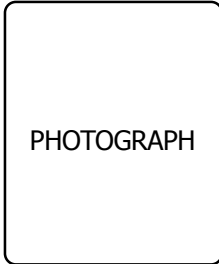
File No. :

NSSS No.:

Branch :

State :

Category :



APPLICATION FORM

(To Be Filled in Block Letters)

Surname : _____
First Name : _____
Name of Father / Husband : _____
Sex : _____
Date of Birth : _____
Age : _____
Qualification : _____
Name of Local Branch of I.M.A. : _____
Name of State Branch of I.M.A. : _____
I.M.A. H.Q. L.M. No. : _____

Correspondence Address

State : _____ Pin Code _____

Telephone No. : _____
Resi : _____
Clinic : _____
STD Code No. : _____
Mobile No. : _____
E-mail : _____

I, the undersigned hereby apply for the Membership of I.M.A. National Social Security Scheme.

I enclosed herewith Demand Draft/Cheque No. _____ Date _____
drawn on _____ for Rs. _____

being the Admission Fee as per age + Rs. 5,000/- (A.F.C.) + Membership Fee Rs. 50/- only. I do hereby
declare that above information is true and I have withheld no information what so ever regarding the
Application and I agree to pay the amount demanded as per the death of member of this scheme.
I further agree to abide by the condition laid down in the constitution.

Date : _____

CERTIFICATE

Applicant's Signature

This is to certify that Dr. _____ is a Life Member
of _____ Branch of I.M.A. _____ State
From _____ Date _____

Signature _____

Secretary / President
(Rubber Stamp of Local Branch)

RULE OF ELIGIBILITY TO BECOME MEMBER OF IMA NSSS :-

Any life member of I.M.A. upto age of 60 years residing in India is eligible to become a member of this scheme, but members above the age of 40 years and below the age of 60 years, must be life member of I.M.A. atleast for 3 Years on the day of joining the scheme.

RULE FOR BENEFIT : (Amended Rule Since 19-7-2002)

Benefit of Fraternity Contribution of the scheme is liable after completion of one year of membership of I.M.A. N.S.S.S. However nominee of member be entitled for such benefits if death of members occurs in accidents even within one year of joining the scheme.

- N.B.**
1. Demand Draft of Cheque only payable at Ahmedabad will be accepted M.O. or Cash will not be accepted in any circumstance. Send cheque or Demand Draft by Registered A.D. Post only.
 2. Cheque of Demand Draft to be drawn in favour of **“INDIAN MEDICAL ASSOCIATION - NATIONAL SOCIAL SECURITY SCHEME”**. (I.M.A. N.S.S.S.)
 3. **Life Membership of I.M.A. Head Quarter is Compulsory.**
 4. Form must accompany Certified Photo Copy of (1) Birth Certificate (2) Life Membership Certificate of I.M.A. H.Q. (3) Medical Council Registration Certificate.
 5. Passport size Photograph.

: NOMINATION FORM :

Name of the Nominee

(In Capital Letter) _____

**Specimen Signature of Nominee or
Guardian in case of minor nominee :**

**Relationship with
Member :** _____

**If Nominee is Minor, Name of the person who
represents the minor and his/her address :**

Date of birth and Age of Minor

| Amount For D.D. For Various Age Group | ADVANCE FRATERNITY CONTRIBUTION (A.F.C.) | MEMBERSHIP FEES | ADMISSION FEES | TOTAL RS. |
|--------------------------------------------------|-------------------------------------------------------------|----------------------------|---------------------------|----------------------|
| 1. Below age 30 Years | 5000 | 50 | 1000 | 6050 |
| 2. Between 31-40 Years | 5000 | 50 | 2000 | 7050 |
| 3. Between 41-50 Years | 5000 | 50 | 3000 | 8050 |
| 4. Between 51-55 Years | 5000 | 50 | 4000 | 9050 |
| 5. Between 56-60 Years | 5000 | 50 | 5000 | 10050 |

In Case of outstation Cheque - Add Rs. 90/- as Bank Charges