



**INDIAN MEDICAL ASSOCIATION'S
KARNATAKA SOCIAL SECURITY SCHEME (R)- No 47/91-92**

Registered Office : IMA House, 2nd Floor, Bailappanavar Nagar, Hubli-580029.

Ph: 0836-2355656 - Email: imaksshbl@gmail.com - Web : imaksshbl.org

OLD EXISTING SCHEME ☐

NEW SILVER JUBILEE SCHEME ☐

(Separate Application ,DD/ Cheque & Documents should be sent if applied for both the Schemes)

Documents to be attached:

1. Duly filled and signed application form.
2. IMA Life membership certificate (Xerox copy).
3. Address proof –Aadhar/Voter ID.
4. Age proof certificate (Xerox copy)
5. Pan card.
6. Three passport size photos.

Note: a) At par Cheque/DD as per age tariff attached, to be drawn in favor of

IMA KSSS : For Old Existing Scheme

IMA KSSS SILVER JUBILEE : For New Silver Jubilee Scheme

b) Duly filled applications to be sent to registered office address mentioned above.

For office Use Only

IMA-KSSS No :	Receipt No.	Folio No:
Branch :	Date:	
Date of Provisional Admission :		

PHOTO

APPLICATION FORM (To be filled in Block letters)

First Name & Surname : _____

Father's / Husbands Name : _____

Qualifications : _____

Date of Birth:

--	--	--	--	--	--	--	--

 Age: Years

--

 Months

--

Sex: Male ☐ Female ☐

KMC Regn.No : _____ Date of Regn: _____ PAN No: _____

IMA Life Membership No : _____ IMA Branch: _____

CORRESPONDENCE POSTAL ADDRESS	PERMANENT POSTAL ADDRESS	
PIN:	PIN:	
FOR E-COMMUNICATION		
Phone No: Residence -	Hospital -	STD Code -
Mobile No:		
Email :		

I the undersigned hereby apply for the membership of IMA's Karnataka Social Security Scheme under Old Existing Scheme / New Silver Jubilee Scheme (Tick appropriate one).

I have enclosed DD/ Cheque with No. _____ drawn on Bank _____

Branch _____ Dated _____ for Rs _____

in words _____

I do here by declare that the above information is true to the best of my knowledge and belief and that I have not withheld any information what so ever regarding my particulars. My membership from the scheme may be terminated if any information given is found to be incorrect or submission of any false information in the application form for joining the scheme or in subsequent communication. I further state that I am in sound state of mind & I agree to pay the Fraternity Contribution as per the rules of the scheme from time to time. I will abide by the constitution and bye-laws of IMA KSSS and amendments made from time to time in the constitution and bye-laws in future. I accept any decision of the Managing Committee as final. I also accept the legal jurisdiction of the IMA KSSS as Hubballi.

Date: _____

Place: _____

Signature of the Applicant

Motivated by (IMA / KSSS Member) _____

I, Dr. _____ IMA Life member of _____

branch do hereby recommend Dr. _____

Life member of _____ Branch to become member of IMA'S KSSS.

Seal of Local branch

Signature of Local Branch President / Secretary/IMA'S KSSS MC Member

NOMINATION FORM

Sl.No	Name	Relationship	Signature
1			
2			
3			
4			

Specimen Signature of the Guardian in case of minor nominee. _____

Name of the person who represents the minor & His / Her Address

Date of Birth of the Minor1)

--	--	--	--	--	--	--	--

 Age: Years

--

 Months

--

Date of Birth of the Minor2)

--	--	--	--	--	--	--	--

 Age: Years

--

 Months

--

I hereby declare that the above information furnished by me is true and correct.

Signature of the Applicant

NEW SILVER JUBILEE SCHEME OF IMA KSSS HUBLI FEES STRUCTURE (TARRIF.)

DD/At Par Cheque should be sent in the name of "IMA KSSS SILVER JUBILEE"

Group	Silver Jubilee Scheme Age in Years	Subscription Fees	Registration Fees	Membership Contribution Fees	Group Accident Benifit Fees	Advance Fraternity Contribution	Total Amount
1	Below 30 years	200	500	10500	1500	10000	22700
2	Below 31 to 35 years	200	500	12000	2000	10000	24700
3	Below 36 to 40 years	200	500	13500	2500	10000	26700
4	Below 41 to 45 years	200	500	18000	3000	10000	31700
5	Below 46 to 50 years	200	500	23500	4500	10000	38700
6	Below 51 to 55 years	200	500	31000	5500	10000	47200
7	Below 56 to 60 years	200	500	40500	6500	10000	57700

Old Existing IMA KSSS Scheme Fees Structure Effective From 01.04.2016

DD/At Par Cheque should be sent in the name of "IMA KSSS"

Group	Scheme Age in Years	Subscription Fees	Registration Fees	Membership Contribution Fees	Advance Fraternity Contribution	Total Amount
1	Below 30 years	200	500	3000	8000	11700
2	Below 31 to 35 years	200	500	3500	8000	12200
3	Below 36 to 40 years	200	500	4000	8000	12700
4	Below 41 to 45 years	200	500	12000	8000	20700
5	Below 46 to 50 years	200	500	15000	8000	23700
6	Below 51 to 55 years	200	500	20000	8000	28700
7	Below 56 to 60 years	200	500	28000	8000	36700