



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

Registered Office : IMA House, 2<sup>nd</sup> Floor, Bailappanavar Nagar, Hubli-580029.

Ph: 0836-2355656 - Email: [imaksshbl@gmail.com](mailto:imaksshbl@gmail.com) - Web : [imaksshbl.org](http://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: 

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 Age: Years 

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 Months 

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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

**OLD EXISTING SCHEME OF IMA KSSS SCHEME FEE STRUCTURE (TARIFF) EFFECTIVE FROM 01/04/2023**

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

<b>Group</b>	<b>Old Existing Scheme Age in Years</b>	<b>Subscription Fee</b>	<b>Registration Fee</b>	<b>Membership Contribution Fee</b>	<b>Advance Fraternity Contribution</b>	<b>Total Amount</b>
1	Below 30 Years	200	500	1000	16000	17700
2	Below 31 to 35 Years	200	500	1500	16000	18200
3	Below 36 to 40 Years	200	500	2000	16000	18700
4	Below 41 to 45 Years	200	500	12000	16000	28700
5	Below 46 to 50 Years	200	500	15000	16000	31700
6	Below 51 to 55 Years	200	500	20000	16000	36700
7	Below 56 to 60 Years	200	500	28000	16000	44700

**IMA KSSS SILVER JUBILEE SCHEME NEW MEMBERSHIP FEE STRUCTURE (TARIFF) EFFECTIVE FROM 15/05/2025**

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

<b>Group</b>	<b>New Silver Jubilee Scheme Age in Years</b>	<b>Subscription Fee</b>	<b>Registration Fee</b>	<b>Membership Contribution Fee</b>	<b>Group Accident Benefit Fess</b>	<b>Advance Fraternity Contribution</b>	<b>Total Amount</b>
1	Below 30 Years	200	500	8500	1500	15000	25700
2	Below 31 to 35 Years	200	500	10000	2000	15000	27700
3	Below 36 to 40 Years	200	500	11500	2500	15000	29700
4	Below 41 to 45 Years	200	500	18000	3000	15000	36700
5	Below 46 to 50 Years	200	500	23500	4500	15000	43700
6	Below 51 to 55 Years	200	500	31000	5500	15000	52200
7	Below 56 to 60 Years	200	500	40500	6500	15000	62700