# **PHOTO** Of **Applicant**

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Association of Su	rgeons of India 457 555
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## ASI Social Security Scheme

## The Association of Surgeons of India

21, Swamy Sivananda Salai, Chepauk, Chennai – 600 005 Ph: +91 44 25383459, 25385584 Fax: +91 44 25367095 Email: asi@md5.vsnl.net.in Website: www.asiindia.org

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File No.	
ASI SSS No	
Branch	
State	
Window period	

FOR OFFICE LISE ONLY

## **APPLICATION FORM**

(TO BE FILLED IN BLO	OCK LETTERS) ( <u>PLEASE FILL THE</u>	FORM IN DUPLICATE)	window period			
ASI FL NO:	Name:	_ Name:				
Sex: Age: _	yrs. Date of Birth.	: (Attach Proof)				
Name of Father/	Spouse:					
PAN Card No	Name of St	ate Branch of ASI	:			
Correspondence A	Address with State and I	Pin Code :				
Tel. No	Mobile	Email:				
DECLARATION BY THE APPLICANT						
I am aware of the ru	ereby apply for the members les and regulations of "ASI So s (In words _ EFT no Dated _	ocial Security Scheme	e" and I will abide by it.			
being the Admission Fees as per age. I also agree to pay Annual Subscription of Rs 1000/- and yearly death Fraternity Contribution (FC) (@Rs.500/- per death) demanded as per no of death of members of this scheme from July every year. I declare that information given by me is true.						
Photo	Name of 1 <sup>st</sup> Nominee	Photo	Name of 2nd Nominee			
Of	Relationship to Applicant	Of	Relationship to Applicant			
1 <sup>st</sup> Nominee	Signature of 1st nominee (Optional)	2 <sup>nd</sup> Nominee	Signature of 2nd nominee (Optional)			
Applicant's Sigr	nature					
			ON. TREASURER ASI			
Dr Shiva K Mi		nesh Bensam	Dr C.R.K. Prasad			
<b>A</b> 11.15	NOMINATED ASI SS					
CHAIRMAN			TREASURER			
		IK SHAH 1/1690	Dr SHALABH GUPTA 09811965686			
09431821878 09824044690 09811965686 09811965686						

Application Form with Multicity Cheque/ DD to be send in favor of 'ASI SSS' payable at Chennai to The Chairman, ASI SSS, 21, Swamy Sivananda Salai, Chepauk, Chennai – 600 005, INDIA. For Payment by NEFT Account Details are BANK OF BARODA, SB a/c No: 0678 01 000 13529 Branch: TRIPLICANE, IFSC code: BARBOTIRUVA (Please Quote the Transaction No)

#### **Aim And Advantages**

To help the deceased member's family

Premium is very minimum comparing to any Insurance scheme. Scheme solely works on members contribution. Surgeons up to 65 years can join in the scheme.

No medical certification is needed to join the scheme.

Early settlement of death claim within a month.

Documents like Death certificate, membership identity and the City branch Secretary's Recommendation are only needed for the claim.

The bereaved family will receive an amount equivalent to 500 times the current net membership of scheme.

#### **Eligibility of the Members**

- 1. Any Life ASI member below the age of 65 years on the day of joining is eligible to become a member.
- 2. The members who have joined this scheme before 30.11.2017 are "FOUNDER MEMBERS" of this scheme.
- 3. The scheme starts on 1.4.2017
- 4. Window period TWO YEARS i.e. Eligibility to claim will be after completing 24 months from joining scheme.
- 5. Fill up application form with specimen signatures of nominee with photos.
- 6. Photocopies to be attached: a) Date of Birth b) PAN Card Copy c) ASI Membership Card

#### Admission Fees: (One Time Only At The Time Of Admission)

1. Below 30 years	Rs.	5,000/-
2. Between 30 to 35 years	Rs.	6,000/-
3. Between 35 to 40 years	Rs.	8,000/-
4. Between 40 to 45 years	Rs.	10,000/-
5. Between 45 to 50 yrs	Rs.	15,000
6. Between 50 to 55 yrs	Rs.	20,000/-
7. Between 55 to 60 yrs	Rs.	25,000/-
8. Between 60 to 65 yrs	Rs.	30,000/-

This is the only fees that a Full Life ASI member pays according to age to enroll. PI see Clause V of constitution.

#### Annual Subscription (To Be Paid Annually from July every year)

Every member of the scheme shall pay Rs 1000/- per member every year. Pl see Clause VI.

### Fraternity Contribution(FC) (To Be Paid Annually from July every year)

Every member of the scheme shall pay a fraternity contribution of Rs. 500/- per death (if any) for a continuous period of 25 years. FC (No of Deaths X Rs 500/-) have to be paid together every year on notification. eg. If there are 5 deaths in a year then FC will be Rs 2500/- for that year. Pl see Clause VII.

#### **Honorary** member

Those who make payments for 25 years continuously need not make any further FC payment. They will remain as honorary members of the scheme with all the benefits of an ordinary member. PI see Clause VIII.

### Member's disqualification

- 1. Every member of the scheme shall pay the Annual Charge of Rs 1000/- and fraternity contribution at the rate of Rs. 500/- per death. The secretary of the scheme will send individual demand notice in the 3rd week of July showing the exact amount to be paid. The last date for payment without fine is 30th September every year, after that there will be a fine of Rs. 100/- per month. If the member does not make the payment within 90 days, a registered notice will be send at members cost. The membership shall stand terminated if the member does not make the payment within 15days of receipt of the notice. Please see Clause IX of the constitution.
- 2. If a member supplies any wrongful information in his application form or at any time during his membership term by which, he violates any provision and tries to obtain any benefit under this scheme, then after giving him an opportunity of being heard before the Managing Committee, if his explanation is not found satisfactory, the Managing Committee of the scheme shall terminate the membership of the member concerned subject to ratification by the General Body.
- 3. After termination of membership of any member, he can rejoin the scheme as a new member by paying stipulated admission fees.
- 4. If any member, at any time, for any reason ceases to be a member of ASI his membership of this scheme shall cease automatically but if such a member revives his membership of ASI within a period of 6 months, he can get his membership of the scheme revived on payment of stipulated fees. If he does not get his membership revived within the stipulated period, he will be treated as a voluntarily retired member.