

Indian Cancer Society

74, Jerbai Wadia Road, Bhoiwada, Parel, Mumbai 400 012.
Tel.No.24139445 & 24139542



MEMBERSHIP APPLICATION FORM (Individual)

The Hon.Secretary & Managing Trustee
Sir,

Please enroll me as a Member of the Indian Cancer Society as indicated in the box below. I wish to avail of the benefit of Membership including your Cancer Insurance Policy.

Category	Please tick	Sum Assured	Membership Fee	Premium	Service Tax	Total
a. Well-Wisher Member	<input type="checkbox"/>	Rs.2 Lakhs	Rs.200/- p.a.	Rs.800/-p.a.	Rs.82/-p.a.	Rs. 1082/-
	<input type="checkbox"/>	Rs.50000/-	Rs.200/- p.a.	Rs.200/-p.a.	Rs.21/-p.a.	Rs. 421/-
b. Individual Ordinary Member(Non Voting)	<input type="checkbox"/>	Rs.2 Lakhs	Rs.1000/-p.a.	Rs.800/-p.a.	Rs.82/-p.a.	Rs. 1882/-
	<input type="checkbox"/>	Rs.50000/-	Rs.1000/-p.a.	Rs.200/-p.a.	Rs.21/-p.a.	Rs. 1221/-
c. Individual Life Member	<input type="checkbox"/>	Rs.2 Lakhs	Rs.50000/- (for 10 years)	Rs.800/-p.a.	Rs.82/-p.a.	Rs. 50882/-
	<input type="checkbox"/>	Rs.50000/-	Rs.50000/- (for 10 years)	Rs.200/-p.a.	Rs.21/-p.a.	Rs. 50221/-

Add on Insurance for Children

- i) One child Rs.50,000/- Rs.100 p.a. Rs.11/-p.a. Rs. 111/-
ii) Two children Rs.50,000/-each Rs.200/-p.a. Rs.21/-p.a. Rs. 221/-

I agree to abide by the rules and regulations governing the membership and the Insurance Scheme currently in force and as may be amended from time to time.

I enclose cheque/Cash/D.D. for Rs. _____ (Rupees: _____)

being the amount due for type of membership indicated above.

(Cheque to be drawn in favour of **Indian Cancer Society**).

I enclose the proposal form (in duplicate), for the Cancer Insurance Policy duly completed.

Signature of applicant _____

Name _____

Address _____

Date:

Telephone No.(if any)

MAJOR TERMS AND CONDITIONS FOR ISSUING THE INSURANCE POLICY

- The age of applicant should be less than 70 years.
- None of the insured should be suffering from any type of Cancer as per the Insurance rules.
- The age of children should be between 1 year to 20 years.
- The Insurance Policy is valid for one year and must be renewed every year through ICS on payment of the premium and service tax.
- Insurance Policy will be issued by New India Assurance Co.Ltd., after the receipt of completed Proposal forms.
- The Insurance policy is subject to the detailed policy wordings issued by New India Assurance Co. Ltd. the insured for the purposes of this policy include the insured himself/herself and his/her spouse. If any one of the said person first contracts cancer, the benefits of this policy shall be extendable to such person only and shall therefrom forthwith cease to be applicable to the other person.
- Members spouse can be covered without additional premium . However, only one will be entitled to claim.

For Office Use only

Membership No:

Date of Enrollment :