



# INDIAN PSYCHIATRIC SOCIETY 'SOCIAL SECURITY SCHEME IPS'



IPS Receipt No. / Date /
S.S.S. Receipt No. / Date /
S.S.S. IPS Membership No. / Date /

## MEMBERSHIP APPLICATION FORM (To be filled in Block Letters)



CITY : \_\_\_\_\_ STATE : \_\_\_\_\_ IPS ZONE : \_\_\_\_\_

First Name : \_\_\_\_\_

Middle Name (Father/Husband) : \_\_\_\_\_

Last Name (Surname) : \_\_\_\_\_

Date of Birth (DD/MM/YY) : \_\_\_\_\_ Gender : \_\_\_\_\_ Blood Group : \_\_\_\_\_

Life Fellow / Ordinary / Associate Membership No. of IPS : \_\_\_\_\_

Address with Pin Code : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone No.: STD : \_\_\_\_\_ (C) \_\_\_\_\_ (R) \_\_\_\_\_

Mobile No.: \_\_\_\_\_

E-mail ID : \_\_\_\_\_

Name of the Nominee : \_\_\_\_\_

Relationship with member : \_\_\_\_\_

If Nominee is minor, Name & Address of the person who represents the minor

\_\_\_\_\_

I enclose herewith Cash/Multi City Cheque/Demand Draft/Transfer/NEFT/RTGS (UTR No. must)

No. \_\_\_\_\_ Dated \_\_\_\_\_ Bank & Branch \_\_\_\_\_

for Rs. \_\_\_\_\_ being the One time **Admission Subscription as per the age** + Annual

Membership Subscription Rs. 200 for Five Years = **Rs. 1000/-** + Advance D.F.C. **Rs. 2000/-**.

I do hereby declare that the above information is true and I have not withheld any information whatsoever regarding the application. I agree to pay the amount demanded as per the details of the Scheme. I further agree to abide by the conditions laid down in the CONSTITUTION & RULES AND BYE-LAWS of 'SOCIAL SECURITY SCHEME IPS'. I further agree to abide by the amendments, alterations, if any, in future also.

\_\_\_\_\_  
Applicant's Signature

**Enclosures : Attested Photocopy of Birth Date Certificate • Passport size Two Photos of applicant.**

• PAYMENT DETAILS •

One Time Admission Subscription :	+ Adv. DFC	+ Annual Membership Subscription for 5 Yrs. (Rs. 200/- per year x 5 Yrs)	= Total Rs.
below the age of 30 yrs.	Rs. 1000/-	+ 2000/- + 1000/-	= 4000/-
below the age of 35 yrs. (but above 30)	Rs. 2000/-	+ 2000/- + 1000/-	= 5000/-
below the age of 40 yrs. (but above 35)	Rs. 3000/-	+ 2000/- + 1000/-	= 6000/-
below the age of 45 yrs. (but above 40)	Rs. 4000/-	+ 2000/- + 1000/-	= 7000/-
below the age of 50 yrs. (but above 45)	Rs. 5000/-	+ 2000/- + 1000/-	= 8000/-
below the age of 55 yrs. (but above 50)	Rs. 6000/-	+ 2000/- + 1000/-	= 9000/-
below the age of 60 yrs. (but above 55)	Rs. 7000/-	+ 2000/- + 1000/-	= 10000/-
above the age of 60 yrs.	Rs. 8000/-	+ 2000/- + 1000/-	= 11000/-

Cash / Multi City Cheque / Demand Draft / Transfer / NEFT / RTGS (with UTR No.) must be in favour of  
**'SOCIAL SECURITY SCHEME IPS'**

: Bank Details :

Title of Account : 'SOCIAL SECURITY SCHEME IPS'

Bank : BANK OF MAHARASTRA, Athwa Lines Branch, SURAT, Gujarat

Savings A/c. No. 60302091159 • IFS Code : MAHB0000983

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: FOR OFFICE USE :

Membership Application is accepted/rejected (if rejected, mention the reason) : \_\_\_\_\_

S.S.S. IPS No.: \_\_\_\_\_ S.S.S. IPS Membership Date: \_\_\_\_\_

(Signature)

'SOCIAL SECURITY SCHEME IPS'

Nov. 19

Membership Application Form along with enclosures & the payment should be sent to :

**Dr. Mukesh P. Jagiwala**

'Social Security Scheme IPS'

101, 'Shriji Nivas', A to Z Building, Opp. Dhiraj Sons, Mansukhlal Tower Lane, Athwagate,  
SURAT-395 001 (Gujarat) Mb.: 98795 21795 • E-mail : mukeshjagiwala@yahoo.co.in