

**FORMAT OF APPLICATION FOR MEMBERSHIP
OF ICAI-LIC GROUP TERM INSURANCE SCHEME
FRESH POLICY /RENEWAL OF POLICY**

Members opting for coverage under the scheme may submit particulars for "Life Insurance Corporation" Scheme along with the requisite premium by way of **Demand Draft** drawn in favour of "ICAI-Term Insurance LIC" payable at Noida/New Delhi.

Sl. No	Description	Details
1.	Membership Number as per ICAI record	
1.	Name of the member as per ICAI Record	
2.	Address	
3.	Contact Details	Telephone No..... Mobile No..... E-mail id..... Fax No (if any)
4.	Date of Birth	
5.	Age	
6.	Name of the Nominee	
7.	Spouse Details (if desired and covered under the scheme)	
8.	Name of Spouse	
9.	Date of birth of spouse	
10.	Age of Spouse	
11.	Name of Nominee (in case of spouse)	
12.	Demand Draft Details	Demand Draft No..... Drawn on.....(Name of the Bank) Dated.....for Rs.....

Details of member and or spouse and the Premium Paid

		Date of Birth	Age	Basic Assures	sum	Premium with the GST Paid
Self						
Spouse	Yes / no					
			Total Amount Paid			

Duly filled in & signed Application Form along with Demand Draft of requisite amount of premium plus GST drawn in favour of "ICAI-Term Insurance LIC" payable at Noida/New Delhi can be sent directly at Secretary, The Committee for Capacity Building of Members in Practice (CCBMP), The Institute of Chartered Accountants of India, Administrative Building, First Floor ICAI BHAWAN, A-29, Sector 62, NOIDA-201309.

For further details and clarification member may send e-mail at ti.cbmp@icai.in.

Yours faithfully

(Signature of the Member)