Tele (079) 2658 06 90

SOCIAL SECURITY SCHEME

GUJARAT STATE BRANCH
INDIAN MEDICAL ASSOCIATION

Office : "A.M.A. House", 3rd Floor, Opp. H. K. College, Ashram Road, Ahmedabad - 380 009.
E-mail : sssgsbima@gmail.com

GST IN No. : 24AAATI0762K1ZR

FOR OFFICE USE
BRANCH
S.S.S. NO.
R. NO.
ENROLLMENT DATE

PLEASE USE BLOCK LETTERS

Surname :

First Name :

Father / Husband's Name :

Date Of Birth :

PAN Card No. : Aadhar Card No. :

GST No. :

Qualification :

1. Degree/Diplom : _____
2. Year of Passing : _____
3. College & University : _____
4. Gujarat Medical Council No. : _____

Date of (LIFE) Membership of I.M.A.

Name of Local Branch:

CORRESPONDENCE ADDRESS

Email :

Telephone Nos. with STD Code

Resi. :

Clinic :

Mobile No. :

I the undersigned hereby apply for the membership of Social Security Scheme of Gujarat State Branch, I.M.A. I enclose herewith D.D./cheque No._____ for Rs._____Dt._____ Bank _____ Drawn on being the admission fees as per the age+Rs. 3000/-(A.F.C.) + Annual subscription Rs. 1/-

I do hereby declare that the above information is true and that I have withheld no information whatsoever regarding the application and I agree to pay the amount demanded as per details of members of this scheme.

I further agree to abide by the conditions laid down in the constitution approved by the State Council for this scheme.

Full Name of the Nominee :
(only one name in Capital letter) :
Signature / Thumb impression of Nominee :
Relationship with Applicant :
Address of Nominee : _____

PAN Card No. : Aadhar Card No. :

Date : _____ Signature _____

P.T.O.

	Admission Fee	18% GST	Advanced Fraternity Contribution	Annual Subscription	Total
UP To 30 Years	Rs. 1000/-	180/-	Rs. 3000/-	Rs. 1/-	Rs. 4181/-
31 To 40 Years	Rs. 2000/-	360/-	Rs. 3000/-	Rs. 1/-	Rs. 5361/-
41 To 50 Years	Rs. 3000/-	540/-	Rs. 3000/-	Rs. 1/-	Rs. 6541/-
51 To 55 Years	Rs. 10000/-	1800/-	Rs. 3000/-	Rs. 1/-	Rs. 14801/-
56 To 60 Years	Rs. 20000/-	3600/-	Rs. 3000/-	Rs. 1/-	Rs. 26601/-

ADMISSION FEES ONCE PAID WILL NOT BE REFUNDED

Scan & Pay

- Cheques payable at Ahmedabad / UPI Transaction ID will be accepted. M.O. , Cash or Out-Station Cheque will not be accepted in any circumstance.
- Local Cheque to be drawn in favour of **S.S.S., G.S.B. I.M.A.**
- Life membership of I.M.A. is compulsory.
- Photo copy of Life Membership Certificate and PAN Card &Aadhaar Card must accompany with this form, with copy of PAN Card &Aadhaar Card of the Nominee.
- In case, where nominee is minor or illiterate, the left thumb impression must be taken.
- **For Members joining on and after 1-12-2003**
  He/She have to shall pay the fraternity contribution continuously for twenty five years from the date of joining the Scheme , as per constitution amended in general body meeting of Social Security Scheme held at Ahmedabad on 22-11-2003.

Approved Amendments from 26 / 12/2025

- A member upto age of 60 years can enroll himself / herself in Social Security Scheme if he / she is life member of IMA Gujarat State Branch.
- The benefit of Fraternity Contribution can be availed only after the completion of 3 years of Social Security Scheme membership.
- **Brotherhood Fraternity Contribution (BFC) :**
  All retired and active members have to pay B.F.C. contribution yearly
- A life member above age of 60 years is not eligible to become a member.

❖ ❖ ❖ ❖ ❖ ❖

CERTIFICATE

This is to certify that Dr. _____

is a LIFE MEMBER of _____

I.M.A. since _____ years.

If New Member Give Date _____ For H.F.C. Paid to Gujarat State

Branch by D.D./Cheque No. _____

Introduced by Dr. _____ S.S.C. No. _____

For Local Branch I.M.A.

DATE	BRANCH	SIGNATURE
	(Rubber Stamp Compulsory)	Secretary / President of the local Branch I.M.A.

This is to certify that Dr. _____

is a life member of G.S.B. vide No. _____

Signature _____
Hon. State Secretary
(G.S.B., I.M.A.)

Signature _____
Hon. Secretary
(Social Security Scheme; G.S.B.,I.M.A.)