

INDIAN INSTITUTE OF INSURANCE SURVEYORS & LOSS ASSESSORS

"Promoted By: IRDA-GOVT. OF INDIA"

Admin Office- Door No 3-5-890, Flat No 315, Paras Chambers,
Himayath Nagar, Hyderabad - 500029, Phone. 040-66253666



ADMISSION FORM - IIISLA BENEVOLENT FUND

To be filled in capital letters and with black ink

1	Name of member	
2	Address of correspondence	
3	Mobile/Tel Nos	
4	E-Mail id	
5	IIISLA membership Number	
6	SLA No.	
7	Date of Birth	Enclosed proof of age
8	Cheque /DD details	

Nominee for compensation

9	SL NO	Name	Gender Male/Female	Date of Birth	Relation	% share
	1					
	2					
	3					
	4					

Declaration: All informations given above are correct to the best of my knowledge. I hereby abide by the rules & regulation laid down for IIISLA Benevolent Fund. I am fully aware that if any deleberate misrepresentation/concealment of fact is found at any time my right shall be forfeited.

Date:

Place

(Signature of Applicant)