

**BENEVOLENT FUND
FOR THE MEMBERS OF
THE INSTITUTE OF COST AND WORKS ACCOUNTANTS OF INDIA**

Application Form for Life Membership

1. **FULL NAME** (In block letters) : _____
2. **Address (office)** : _____

Tel. No. (with STD) : _____
Mobile No. : _____
Email : _____
- (Residence) : _____

Tel. No. (with STD) : _____
Mobile No. : _____
Email : _____
3. **AGE (Date of Birth)** : _____
4. **MEMBERSHIP NUMBER** : _____
5. **WHETHER ASSOCIATE/FELLOW** : _____
6. **PARTICULARS OF DEPENDENTS (SPOUSE/DEPENDENT CHILDREN)**

NAME	Relationship with the Applicant	Age as on date of application	DOB (DD/MM/YYYY)	Sex
(a) _____	_____	_____	_____	_____
(b) _____	_____	_____	_____	_____
(c) _____	_____	_____	_____	_____
(d) _____	_____	_____	_____	_____
(e) _____	_____	_____	_____	_____

7. (a) **FULL NAME OF NOMINEE** : _____
ADDRESS : _____

- (b) **RELATIONSHIP WITH THE NOMINEE** : _____
- (c) **SPECIMEN SIGNATURE OF NOMINEE** : _____
8. **PARTICULARS OF DEMAND DRAFT / CHEQUE** : **Amount Rs. 7500.00/- (Rs. Seven Thousand five hundred only)**
- _____
- No. _____ Date _____
- Name of the Bank _____
- Branch _____

DATE _____

SIGNATURE OF APPLICANT

N.B. DEMAND DRAFT / CHEQUE SHOULD BE DRAWN IN FAVOUR OF "ICWAI MEMBERS BENEVOLENT FUND" ON ANY SCHEDULED BANK PAYABLE AT KOLKATA. CHEQUES SHOULD BE MULTI-CITY (AT PER)