



I/We hereby declare that the content of the form and document has been fully explained to me/us and I/We have fully understood the significance of the proposed contract.

Signature/Thumb impression of Witness*	Signature / Thumb Impression	Signature / Thumb Impression
Name & Address _____ Member	of the Primary Insured Member	of the Secondary / Joint Insured
Occupation _____	Date & Place: _____	Date & Place: _____

\* Witness Signature, Address and Occupation is along with signature of Insured Member

**Declaration made by Declarant where Member has:**

**a) affixed his/her thumb impression; OR b) signed in vernacular; OR c) not filled the application**

“I hereby declare that I have fully explained the above questions and contents of the Member Enrollment Form to the Member and the Joint Life Assured (if any) and I have truthfully recorded the answers given by the Member and the Secondary / Joint Life Assured (if any) and that the Member and the Secondary / Joint Life Assured (if any) has affixed the thumb impression above after fully understanding the contents thereof.”

Signature of the Declarant	Address of the Declarant _____
Name of the Declarant _____	Occupation of the Declarant _____

Signature of the Witness	Address of the Witness _____
Name of the Witness _____	Occupation of the Witness _____

“I/We certify that the contents of the form and documents have been fully explained to me by Mr. / Mrs.: \_\_\_\_\_ and I/We have understood the significance of the proposed contract.

Signature/Thumb impression of Member _____	Name, of Declarant _____
Signature / Thumb Impression of the Secondary/ Joint Life Assured (if any)	Designation of Declarant _____
	Occupation of Declarant _____

Declaration made by Legal Guardian if any of the Member or Joint Life Assured is a minor: I/We hereby declare that the content of the form and document filled up by the Member or Joint Life Assured is accurate and true to my/our knowledge.

Signature / Thumb Impression of the  
Legal Guardian (if Member is a Minor)

Signature / Thumb Impression of the  
Legal Guardian (if Secondary / Joint Life Assured is a Minor)