THE INSTITUTE OF CHARTERED ACCOUNTANTS OF PAKISTAN

Life Insurance Scheme
with
EFU Life

Enrollment Form

Membership #:	R -
Member's Name:	
Date of Birth	D D - M M - Y Y
C.N.I.C. No. (Please also attach copy)	- -
Scheme/Mode (Please check one box)	☐ CONVENTIONAL ☐ TAKAFUL
Sum insured (Please check one box)	☐ Rs. 1 million ☐ Rs. 2 million ☐ Rs. 4 million ☐ Rs. 6 million ☐ Rs. 8 million ☐ Rs. 10 million ☐ Rs. 15 million
Age group (Please check one box)	☐ 18 to 59 years ☐ 60 to 64 years ☐ 65 years ☐ 66 years ☐ 67 years ☐ 68 years ☐ 69 years
Gender (Please check one box)	☐ Male ☐ Female

Signature (Member)

Signature & Stamp of Policy Holder (ICAP)