

“YUVA RAKSHA”
(GROUP INSURANCE SCHEME FOR STUDENTS)
STUDENTS REGISTRATION FORM

(Copy to be submitted along with the Admission Form)

1. Name of Insured (Student): _____
2. Class : _____
3. Residential Address : _____

4. Student's Date of Birth : _____
5. Blood Group : _____
6. Name of Guardian : _____
7. Signature of the Guardian : _____
8. Amount of premium paid in : _____
Cash or in Cheque (details) _____

Student's Signature

For Office use only:-

Received from Student (Name: _____
of _____ course) premium of Rs. _____ against the
recipient no. dated _____

Institute Seal/College Seal/ Stamp with Signature

(College to preserve the slip along with Admission Form) •