

REGISTRATION FORM
AYUSHMAN BHARAT COORPORATE PSA

Agreement No / Employee Code:

Agreement effective date:

NAME:
(As per Aadhar Card)

ADDRESS:
.....

AADHAR NO

*MOBILE NO:

*EMAIL ID:

EDUCATIONAL QUALIFICATION

I do hereby declare that I shall abide by the rules & regulations of PM-JAY.

Date.....

Signature of Applicant

Attach the below Self Attested Documents:

- *Aadhar Card*
- *PAN Card*
- *Cancelled Check/Passbook*