

# NIMAB FUNERAL SCHEME

Great Francis Street, Nechells, Birmingham. B7 4QN

Email: [janazah@nimabwelfare.org.uk](mailto:janazah@nimabwelfare.org.uk)



**MEMBERSHIP  
REGISTRATION  
FORM – Ref No**

NFS No:

Receipt No:

First Name: \_\_\_\_\_ D.O.B: \_\_\_\_\_

Surname: \_\_\_\_\_ Tel: \_\_\_\_\_

Nationality: \_\_\_\_\_ Mobile: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Post Code: \_\_\_\_\_ Email: \_\_\_\_\_

Marital status  Single  Family

Husband's/ Wife's Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Next of Kin: \_\_\_\_\_ Emergency Contact (Mobile): \_\_\_\_\_

**Immediate Family Members (West Midlands Residents Only):**

	Full Name	Age
1	_____ /	_____
2	_____ /	_____
3	_____ /	_____
4	_____ /	_____
5	_____ /	_____
6	_____ /	_____
7	_____ /	_____
8	_____ /	_____
9	_____ /	_____

- Are any of your family members above in the hospital now? (Please tick) Yes  No
- Are any of your family members above not living with you? (Please tick) Yes  No
- If you have answered 'Yes' to any of the above please give details:  
\_\_\_\_\_

**NB: Please notify us of any changes in your family circumstances** \_\_\_\_\_

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If you require

please contact any of the numbers below:

1. NIMAB office: 0121 359 6498
2. Office Administrator: 07538 281 085

any further information,

**APPLICABLE FEES:**

**First year of joining:**

**Family:** £120 per annum

**Single:** £60 per annum

**Renewal Fee:**

**Family:** £100 per annum

**Single:** £50 per annum

**NFS Bank Details:**

Bank Name: **Barclays**

Sort Code: **20 09 03**

Acct No: **33228150**

## Declaration

I have read, understood and agreed to all the terms and conditions of the NWT FUNERAL SCHEME

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

### For Office Use Only

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Form Submission Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Membership Start Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Paid: £ \_\_\_\_\_

Officer's Name: \_\_\_\_\_

Position: \_\_\_\_\_

Authorisation: \_\_\_\_\_

Comments:

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