

## OFFER Form

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

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

Offer Validity : From Date: \_\_\_\_\_ To Date: \_\_\_\_\_

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

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

Contribution Amount: \_\_\_\_\_

Amount in Words : \_\_\_\_\_

Financial Advisor / Code: \_\_\_\_\_

Offer Locking Period: \_\_\_\_\_ From Dt.: \_\_\_\_\_ To Dt.: \_\_\_\_\_

Total Locking Amount: \_\_\_\_\_

Family Locking: \_\_\_\_\_

### Terms & Conditions

In my complete consciousness, I, \_\_\_\_\_,  
am giving authority to Enlife Capsure LLP to lock my contribution amount made till  
\_\_\_\_\_. By understanding this agreement, I agree to the clause of keeping  
my contribution amount and my family's previous contribution amount locked in. I  
will not withdraw any amount under any circumstances until the lock-in period's  
agreed duration.

Branch Head Signature

Partner Signature