

Library Membership Slip

Note: All fields are mandatory. Please submit this filled slip along with two recent photographs in Central Library.

Two
Photographs
1.5" X 1.5"

Roll # _____ Name: _____ Cell: _____

Father (Guardian)'s Name _____

Father (Guardian)'s official/Business Address: _____

_____ Father's Cell # _____

Signature _____ Date: _____

For Office Use: Slip Received by: _____ Data entered by: _____ Card Prepared by: _____