

Recommendation

NOTE: SELF ATTESTATION (PLEASE BRING ORIGINAL RESIDENCE PROOF FOR VERIFICATION)

Signature of Applicant.....
Names (in caps)
Designation.....
Stamp of the office

Library Security: (Refundable) (after 6 months)

- 1. Institutional MembershipRs. 2000.00
- 2. Senior Citizen Membership.....Rs. 500.00
- 3. Individual Membership.....Rs. 500.00
(i.e. Govt. employees, Children Section,
Local residents, Out of station residents)

FOR OFFICE USE ONLY

Membership No

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Amount Received (in Rs.)

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 Date

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Receipt No.

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Librarian

Declaration

- 1. I have received my membership I-card.
- 2. I hold myself responsible for the books issued on my Library Membership I-card.
- 3. I undertake to notify change in my official/residential address, mobile number, phone number and email id promptly to the library.
- 4. I undertake to report the loss of M. Card promptly to the library.
- 5. I shall surrender my membership card on leaving the station.
- 6. I shall abide by the rules of the library.

Rules: For Rules and other information log on to the library website i.e. www.chdstatelibrary34.org

Date

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Signature of the Applicant