



सत्यमेव जयते

# Government Arts and Commerce College, Kathlal

## Library Membership Form - Visitor

(IN CAPITAL LETTERS only)

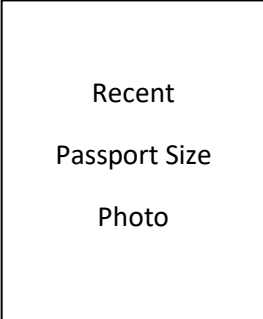
Name : \_\_\_\_\_

(In Full) (Surname) (First name) (Middle name)

Date of Birth : \_\_\_\_\_

Occupation : \_\_\_\_\_

E-mail ID : \_\_\_\_\_



Contact No 

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(Whats app no.)

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(If any other contact no)

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

Contact No of Reference : \_\_\_\_\_

Residential Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Office Address: \_\_\_\_\_

\_\_\_\_\_

I, the undersigned wish to become member of the college library and undertake to abide by all rules of the college library. The personal details, mentioned above are true to the best of my knowledge and belief.

### Undertaking:

1. I have read library rules carefully and shall be responsible for the library material borrowed by me.
2. I shall return library material as per rules on or before due date failing of the same will charged as fine.
3. I am responsible to return the library material whenever it is asked.
4. If there is any change in contact details, I will inform it.

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

Sign of Applicant

Sign and Seal of Principal

### For Library Use Only

Member Code : \_\_\_\_\_ Member ID : \_\_\_\_\_