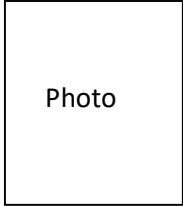




YMCA Library & e- Learning Centre Trivandrum



APPLICATION FOR MEMBERSHIP

Name (block letters) :

Age & Date of Birth :

Name of Guardian :

Tel.No.of Guardian :

Marital Status : Name of Spouse

Residential Address :

Present Address :

Telephone No :

E-mail Address :

Educational Qualification :

Purpose for membership :

Office Address :

Are you a member of YMCA : Yes / No

DECLARATION

I agree to abide by the rules and regulations of the YMCA Library & e- Learning Centre. I shall be personally responsible for any loss sustained by the library due to my membership and shall make good any such loss.

Date :

Introduced by

Signature of the Applicant

(Please turn over)

Recommendation

Shri/Smt..... is known to me personally and I recommend him/her for membership in the YMCA Library & e- Learning Centre . I shall be personally responsible for any loss sustained to the library due to his /her membership.

.....

Signature

Name & Address of Recommender :.....

.....

.....

Phone No :.....

Office Address :.....

ID/Address Proof of Member :.....

For Office use only

Receipt No :.....

Amount :.....

Date :.....

Library Director