

BHAI VIR SINGH SAHITYA SADAN Bhai Vir Singh Marg, Gole Market, New Delhi-110 001, www.bvsss.org <u>LIBRARY MEMBERSHIP FORM</u> I request that I may be enrolled as a member of the library. I promise to obey all the library rules.		Paste latest color PP size Photo
Membership No. :		
Name :		
Date of Birth :		Male <input type="checkbox"/> / Female <input type="checkbox"/>
Father/Husband's Name :		
Department / Institution & Designation :		
Residential Address : & Phone / Cell No. :		
Permanent Address : & Phone / Cell No. :		
Office Address : & Phone No. :		
Email :	Mobile No. :	
Membership Fee deposit Rs. :	Refundable Security deposit Rs. :	
<i>Signature of Applicant & Date</i>	<i>Signature of Librarian & Date</i>	
Bhai Vir Singh Sahitya Sadan, Library Clearance Certificate Membership No. : _____ Name : _____ <input type="radio"/> Return all library material, <input type="radio"/> Surrender Identity Card, <input type="radio"/> Obtain refund of library deposit Remarks from Librarian : _____ <div style="text-align: right;"><i>Signature of Librarian & Date</i></div> Library deposit refund should be collected within 3 Months from the issue of passing certificate or else the deposit will be forfeited.		

Kindly enclosed : 1. Latest Passport size colour photograph. 2. Photocopy of residential proof.
 3. Photocopy of Departmental Identity Card.