



RAVI J MATTHAI LIBRARY

Application Form for Institutional Membership Form

1. Name of the Organisation/ Institutions: _____

2. Address: _____

3. Contact No(s): _____

4. Email: _____

5. Name of the persons who would be authorized to handle the membership:

Sr. No.	Name	Designation	Specimen Signature & Contact No(s)

Declaration

- We _____ hereby declare that the details given above are true to the best of our knowledge and belief. We assure that we will abide by the rules and regulations of Ravi J. Matthai Library which are in force at present and amended from time to time. We also assure that we will keep the office informed about the changes in our contact details, if any.
- By submitting this form, we agree to take care of borrowed materials and return them by the due date and recall date.
- We also agree to pay overdue charges, charges for the lost or damaged materials borrowed from the Library as per the policy.
- We request you to enroll us as a member of this Library.

No. of Tickets (Please Indicate your Preference)		Rate per Ticket (In Rs.)	Total Payment (In Rs.)
	x	1000	

Enclosed herewith is a Demand Draft/ Cheque No. _____, Dated _____ for Rs. _____ drawn in favour of "Institute of Rural Management Anand" payable at Anand.

FOR IRMA Library Use Only

Institutional Membership No. _____ Membership Fees Rs. _____

Receipt No. _____ Date _____

Valid From: _____ to _____

Date:

Dy. Librarian