

V.V.P. SANCHALIT
KICH SCHOOL OF DESIGN
LIBRARY MEMBERSHIP FORM

FORM No. : _____

Date : _____

Enrolment No./Roll No. : _____

Year of Admission : _____

To,
The Librarian,
Kich School of Design
Rajkot.

**Stick Photo
Here**

**+ 1 Photo (For
Lib.Card)**

Sir,

Kindly enroll me as member of the institute library. I mention below all my relevant particulars. I promise to abide by all library rules which may be applicable from time to time. I would be liable to pay dues, which I shall owe due to my negligence of due to infringement of library rules.

Full Name (In **BLOCK** Letters) : _____

E-Mail Address : _____

Local Address : _____

Phone/Cell No. : _____

Permanent Address : _____

Phone/Cell No. : _____

Semester and Branch : _____

Card Issue Date	Sign of Card Receiver

(Signature of Applicant)