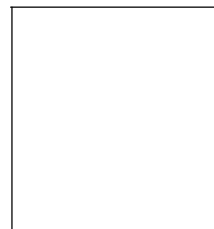




Indian Institute of Technology Ropar
Nalanda Library

Membership Form for the Academic/Research
Institutions & Government Departments



Authorized Person

1. Name of the organization: _____
2. Address : _____

3. Contact No (s): _____
4. E-mail Id: _____
5. Name of the person(s) authorized to handle the membership:

Sr. No.	Name	Designation	Specimen Signature with Contact No.

- By submitting this form, we agree to obey the Library policies, rules and regulations.
- We will notify the library of any changes in our addresses or contact details of nominees.

Bank Account details

Account Name: Library IIT Ropar
Account No: 37193776181

IFSC Code: SBIN0013181
MICR Code: 140002008

Payment Transaction details

Amount _____, **Transaction No.** _____,
Dated _____.

(Admission Fee- Rs. 2,000/- (One-time, Non Refundable), Security Deposit- Rs. 10,000/- (Refundable) and Annual Membership Fee - Rs. 10,000/- (Effective for one year from the date of registration))

Date:

Place:

(Signature with Stamp)

For Library Use Only

The membership for reading purpose is granted for the period from _____ to _____.

Circulation In-charge

Librarian

