

APPLICATION FORM NO.
FORM FEE RS.5/-

711

TELE NOS.22815189 & 22843703

DAVID SASSOON LIBRARY & READING ROOM
APPLICATION FOR MEMBERSHIP

(Form is valid for 1 year from the date of issue)

To
The Hon. Secretary
The David Sassoon Library & Reading Room
152, M G Road, Off, David Sassoon Library Marg
Fort, Mumbai 400 001



Dear Sir,

I hereby request you to enroll me as a **PATRON/LIFE/ORDINARY MEMBER** of the Library. I agree to comply with all the rules, regulations and bye-laws of the Library.

My particulars are as under:

FULL NAME (SURNAME FIRST) : SHRI/SMT/KUMARI_____

RESIDENTIAL ADDRESS : _____

TELE NO. / MOBILE NO. : _____

E-MAIL ADDRESS : _____

AGE & DATE OF BIRTH : _____

EDUCATIONAL QUALIFICATION : _____

OCCUPATION/PROFESSION : _____

OFFICE NAME : _____

OFFICE ADDRESS : _____

TELE. NO. : _____

PURPOSE OF USING THE LIBRARY : _____

MEMBERSHIP OF OTHER LIBRARIES : _____

LEARNED SOCIETIES : _____

PAST MEMBERSHIP OF LIBRARY : _____

ANY OTHER INFORMATION : _____

Yours faithfully,

(See overleaf for instructions)

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I have know the above application for a period of_____ year. The above information given by him/her is true and correct to the best of my knowledge. He/She will strictly abide by the rules, regulations and bye-laws of the Library.

Full Name of the Proposer _____ Type of Membership _____

Signature of the Proposer _____

1. PATRON MEMBER	Rs.20000/-	2. LIFE MEMBER	Rs.15000/-	3. ORDINAR MEMBER	Rs.1800/-
4. ENTRANCE FEE	Rs. 500/-	5. DEPOSIT	Rs. 1000/-	6. COPY OF BYE-LAWS	Rs.20/-.

N.B. Application form will be treated valid only when cheque is realized.

:FOR OFFICE USE ONLY:

1. Receipt No._____ Date:_____ 2. Interviewed by:_____ Date:_____

3. Approved/Rejected/Kept on waiting list for membership by the Managing Committee

4. Signature of the President: _____ Date: _____