



Central Libray

Srinagar Women's College

Batapora, Zakura Sringar-190006 Email: <u>librarian.swcz@gmail.com</u>

Form No:____

Library Membership Form

(Under Community Outreach Initiative)

Personal Details Full Name:	Paste recent
S/o /D/o W/o:	
Date of Birth (DD/MM/YYYY)://	here
Gender: □Male □Female □Other	
Phone Number: WhatsApp:	
Email Address:	
Residential Details Full Residential Address:	
	-
City/Town:	
State:	
Pincode:	
Proof of Address Please attach a copy of any one valid proof of address:	
☐ Aadhaar Card No	
☐ Voter ID	
☐ Driving License	
☐ Passport	
☐ Utility Bill (within last 3 months)	
☐ Rent Agreement	
☐ Other (Please Specify):	

Library Rules

The library will be open to all during working days from 10:00 am to 4:00 pm.

The issue return counters shall close two hours before the closing of the library.

Personal belongings such as bags, books etc are not allowed inside the library.

Borrowers shall satisfy the physical condition of the books before leaving the issue return

counter.

The reference material/periodicals shall not be issued, however the same can be studied

in the Reading room.

Photography and making calls is strictly prohibited inside the library premises.

Silence shall be strictly observed in the library.

A library user who loses his/her Identity Cards shall immediately make a written report to the Principal or Librarian. A duplicate Identity Card shall be issued on payment of Rs.

100/- under rules. He shall be required to sign an indemnity bond and shall be responsible

for the misuse of the lost Identity Card.

A Library user can borrow two books and shall have to be returned at the expiry of the

fifteen days from the date of the issue.

Library user who failed to return books on due date shall be fined Re 1 per day per book.

Library user can avail reprographic service @ Rs 1 per page.

To avail library membership (under community outreach) a Security Deposit of Rs 1000/-

has to deposited with the library and will be valid for a period of one year. The security deposited will be reimbursed on completion of one year from the date of registration or

on time of cancellation of registration.

Account Details

Account No: 0482040500000025

Account Name: RR Fund & Games Fund

Bank Name: J&K Bank Habbak Crossing, Srinagar

Declaration and Payment Acknowledgment □ I hereby declare that the information provided above is true and correct to the best of my knowledge. □ I agree to follow all library rules and return books on time. □ I understand that I am responsible for any loss or damage of library materials issued in my name. □I understand that a form charge of ₹20/- is non-refundable. □ I have deposited a security deposit of ₹ 1000/- (proof attached) Signature of Applicant: Date: ____/ ____/ (If applicant is under 18 years of age) Name of Parent/Guardian: Signature: _____ Contact Number: _____ **For Library Use Only** Membership Number: _____ Date of Registration: ____/ ____/ Form Fee Received: ₹20/-□Yes □No Security Deposit Received: ₹ 1000/-□Yes □No

Verified By (Staff Name): _____