



STUDENTS MEMBERSHIP FORM

[Return this form along with following Information and one passport size Photo]

IHMR-B ID card No:

Valid Till:

Roll No:

1	Full Name (In Capital) with Roll No. If applicable.		
2	CourseDetails		
3	Permanent Address		
4	Communication Address		
5	Telephone	Residence	
		Office	
		Mobile	
6	E-Mail ID		

I hereby apply for the enrolment as a member of the IIHMR-Library Bangalore with/without borrowing facility. I acknowledge that I have gone through the rules and regulations of the library and do hereby agree to abide by the rules. I furnish above the required particulars about myself.

Date:

Signature of the Applicant

Signature of the Librarian