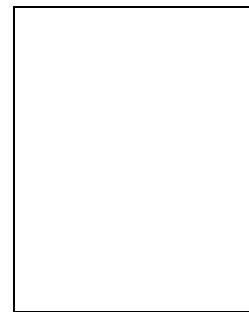




INDIAN INSTITUTE OF TECHNOLOGY GANDHINAGAR
LIBRARY



Family Membership form for the
IITGN Community

1. Name : _____

2. Address : _____

3. Contact Nos : _____

4. Email ID : _____

- By submitting this form, I agree to observe the IITGN Library policies, rules and regulations applicable for staff members.
- I agree to take care of borrowed reading materials and return them on or before the due date and recall date.
- I also agree to pay overdue charges, charges for the lost or damaged materials borrowed from the Library as per the policy.
- I will notify the Library of any changes in our addresses or contact details of nominees

Date :

Place : _____ (Signature of the family member)

Employee /Students Endorsement (Family Member i.e. parents, spouse & children)

The above mentioned person is myand herewith endorsing her/his membership to avail the library services. I am aware of the rules for family member (parents, spouse & children) and will take the responsibility for any loss, damage, mishandling of library materials. She/He will abide by Library rules enforced from time to time.

(Name & Signature)

For IIT Gandhinagar Library Use only

The Membership with borrowing/Consultation facility is granted for the period from _____ to_____.

Date :

(Librarian)