



**CENTRAL LIBRARY
AIIMS, BHUBANESWAR
Membership Form**

Borrower No:-

(For Office Use Only)

Name:-

Admission Year:-

Course :-

Date of Birth:- -----/-----/-----

Photo

Present Address: -

Permanent Address: -

Contact No:-

E-Mail ID:-

Required Material :- Two Stamp Size Photographs and ID Proof Xerox

- By submitting this form, I agree to observe the Central Library policies, rules and regulations.
- I agree to return borrowed materials by the due date or recall date.
- I will notify the Central Library of any change in my address.

Librarian :

Signature & Date :



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