

Servants of India Society's
Dhananjayrao Gadgil Library Pune 411 004

Application for Individual (Annual / Life) Membership

(Minimum Qualification – Graduate in any discipline)

1. Name in block letters: SURNAME NAME MIDDLE NAME
2. Educational qualifications: _____ Date of Birth: DD / MM / YYYY
3. Gender: _____ Blood Group: _____
4. Occupation: Student / Research Scholar / Professional / Business / Teaching / Other
5. Communication Address: _____

_____ City: _____ PIN: _____
6. Contact Nos.: _____
7. Email ID: _____
8. Membership Fees and Deposit:

Particulars	Annual (Rs.)	Life (Rs.)
Membership Fees	700/-	7,000/-
GST 18%	126/-	1260/-
Total Amount Rs.	826/-	8260/-

9. For borrowing books, a deposit of **₹1,000 per book** is required, and members may borrow up to **four books** at a time. The deposit must be withdrawn within three years of discontinuing membership; otherwise, it will be forfeited. Both the Annual and Life Membership fees are non-refundable. There will be a late fee of Re. 1/- per book per day.

DECLARATION

I confirm that I have read and understood the rules and regulations of the GIPE Library and agree to comply with them. Should any book(s) borrowed by me be lost, I accept responsibility to pay the cost of lost book(s) plus 10% replacement charges.

Date:

Signature of Applicant

RECOMMENDATION

This is to certify that _____, residing at the above address, is personally known to me. I hereby recommend him/her for library membership and further affirm that I shall be responsible for any unreturned books or late fees incurred by the member.

Date:

Name & Designation

Signature

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For Office Use Only

Date	Amount	Fees / Deposit	Chq / Transaction ID	Membership No	Staff

Application for Withdrawal of Deposit

I have returned all the document(s) borrowed against my Library Membership No. _____ . I shall be grateful for refund of the library deposit of Rs. _____/-
(in words Rs. _____)

Date:

Signature of the Applicant

To be filled in by Circulation Staff

This is to certify that the borrower has returned all the document(s) to the Library. Hence the Deposit may be refunded.

Date:

Signature of Circulation Staff

Signature of Librarian

To be filled in the presence of Accountant

Received the library deposit of Rs. _____/- (in words Rs. _____
_____) vide Transaction ID / Cheque: _____

Date:

Signature of the Applicant

For any queries, please contact us at nanaji.shewale@gipe.ac.in or call 020 25683370.