



**INDIAN ASSOCIATION OF SPECIAL LIBRARIES AND INFORMATION CENTRES**

P-291, CIT Scheme No 6M, Kankurgachi, Kolkata – 700 054, West Bengal, INDIA

Tel : +91 (033) 2362 9651 email: iaslic.india@gmail.com Website : www.iaslic1955.org.in

**Application for Individual Membership**

To  
The Hony. General Secretary,  
IASLIC  
P-291, CIT Scheme 6M  
Kankurgachi, Kolkata- 700054

Dear Sir,

I highly appreciate and support the objectives of the Indian Association of Special Libraries and Information Center (IASLIC) and I hereby apply for my admission to Annual Membership/ Life Membership/Donor Membership. I agree to abide by the Constitution and Rules of the Association. I am agree to pay the requisite Membership Fees of ₹ / US\$..... if my membership is granted by the Executive Council. My Biodata for membership with **two copies of recent stamp size photographs** are furnished here.

Date:.....

Yours Faithfully,

Signature

|   |         |  |  |  |  |  |      |  |  |  |            |  |         |  |  |  |  |  |  |  |
|---|---------|--|--|--|--|--|------|--|--|--|------------|--|---------|--|--|--|--|--|--|--|
| FULL NAME: DR./SRI/SMT.<br>(Please fill in Block letters) |         |  |  |  |  |  |      |  |  |  |            |  |         |  |  |  |  |  |  |  |
|   | Surname |  |  |  |  |  |      |  |  |  | First Name |  |         |  |  |  |  |  |  |  |
| ADDRESS<br>(Correspondence)                               |         |  |  |  |  |  |      |  |  |  |            |  |         |  |  |  |  |  |  |  |
|   | City:   |  |  |  |  |  | PIN: |  |  |  |            |  | Ph. No. |  |  |  |  |  |  |  |
| ADDRESS (Permanent)                                       |         |  |  |  |  |  |      |  |  |  |            |  |         |  |  |  |  |  |  |  |
|   | City:   |  |  |  |  |  | PIN: |  |  |  |            |  | Ph. No. |  |  |  |  |  |  |  |
| E-mail:   |         |  |  |  |  |  |      |  |  |  |            |  |         |  |  |  |  |  |  |  |

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|---|--|--|--|--|--|--|--|--|--|--|----------------|--|--|--|--|--|--|--|--|--|--|
| Full signature of the Proposer with date: |  |  |  |  |  |  |  |  |  |  | Membership No- |  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|--|----------------|--|--|--|--|--|--|--|--|--|--|

*N.B. :Granting of membership is subject to the approval of Executive Council. Membership card will issued by the General Secretary*

| <b>(FOR OFFICE ONLY)</b>  |          |      |                         |         |                |
|---------------------------|----------|------|-------------------------|---------|----------------|
| Form received on:         |          |      | Date of approval by EC: |         |                |
| Subscription received on: | Payment: | Cash | Cheque                  | Bank Tr | Membership No: |

**For Annual Membership**

Annual Member (Domestic): ₹ 1000

**For Life Membership**

Life Member (Domestic): ₹ 10000

**For Donor Members :** ₹25,000 (Minimum)

***N.B.: Remittance should be made only after being so intimated by IASLIC.***

***Please affix one stamp size passport colour photo in the Form and one copy separately with the Form***