



Library & Information Science Promotion Society (LISPS)

Reg No. 66/2007

Door No. 5, Sadras East, DAE Township,
Kalpakkam - 603102 Tamil Nadu (India)

www.lisps-india.org

lisps.india@gmail.com

Membership Form (Individual)

Form No. :

Date: ___ / ___ / ___

1	Name																						
2	Father's / Husband's Name																						
3	Date of Birth	-		-																			
4	Present Address																			<i>Pin</i>			
5	State																						
6	Phone No.																						
7	Email Id																						
8	Permanent Address																						
9	Membership Type	<input type="checkbox"/> Fellow <input type="checkbox"/> Professional Member <input type="checkbox"/> House-Wife Member										<input type="checkbox"/> Associate Fellow <input type="checkbox"/> General Member <input type="checkbox"/> Student Member											
10	Subscription Type	<input type="checkbox"/> Annual										<input type="checkbox"/> Life											
11	Qualification																						
12	Profession / Designation																						
13	Mother Tongue																						
14	Mode of Payment	Cash / Cheque / Demand Draft																					
15	Amount Paid	Rs.										Receipt No.											
16	Bank Details																						
17	Cheque / DD No.																						
18	Library																						

I hereby declare that the above information is correct and complete. I agree to discharge my responsibility expected of me as a member of this Society.

Signature of the Applicant