MANAGEM	1ENT LIBRARII	ES NETWORK (N	IANLIBNET)	
APP	LICATION FOR	R LIFE MEMBERS	SHIP	
Membership No		LIFE MEMBERSHIP FEE		
		INDIVIDUAL	Rs. 2500.00	
Receipt No		INSTITUTIONAL	Rs. 25000.00	
Dear Sir, Please enrol me/us as a Life, enclosing a Cheque/Demand	Draft No	date	d	drawn o
	for Rs	favour	ing Manageme	ent Librarie
Network.				
My particulars are as under (I	Please use capital	letters)		
Mr./Ms/Dr	Date of Birth			
Qualifications				
	Type of Library			
Office Address				
Preferred Mailing Address				
Telephone (O)	(R) Mobile:			
E-mail:				
I have read the rules and regu by them.				
Sincerely,				
(Signature)				
The Cheque or demand draft Hyderabad, and send to 21 Gree	•	÷		
395005, India				
- -	-	NSFER DETAILS		
Beneficiary's Name	MANAGEMENT LI	NSFER DETAILS BRARIES NETWORK		
Beneficiary's Name Bank Name	MANAGEMENT LI Bank of Baroda	BRARIES NETWORK		
Beneficiary's Name Bank Name Savings Bank Account Number	MANAGEMENT LI Bank of Baroda S.B. A/c No.06230	BRARIES NETWORK		kar Empiro
Beneficiary's Name Bank Name	MANAGEMENT LI Bank of Baroda S.B. A/c No.06230 Gen Next Branch H	BRARIES NETWORK 100003820 Hi Tech City, 291/G/1/ G		•
Beneficiary's Name Bank Name Savings Bank Account Number	MANAGEMENT LI Bank of Baroda S.B. A/c No.06230 Gen Next Branch H	BRARIES NETWORK		•

Note: Send UTR No. and Bank Name for proper tracking of the payment confirmation via email to <u>meetarathod@gmail.com</u>

SWIFT CODE (for international BARBINBBOND

remittance)