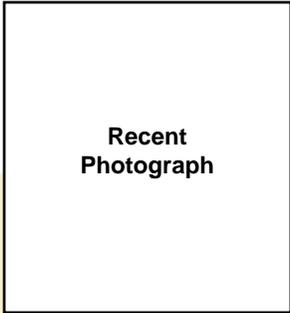




American Library, Kathmandu

Member Registration Form



Surname

First Name

Salutation **Mr./Mrs./Miss**

Home Address

City

District **P. O. Box:**

Phone Numbers

Email

Office Address

or
Educational Institution

City

District **P.O. Box:**

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Patron ID

Alternate ID

Group 1 **Record Date**

Group 2 **Expiration**

Group 3 **Last Used**

Applicant's Signature

Librarian's Signature

Topics of Interest: (e.g. politics, business, environment, American Studies)

- 1.
- 2.
- 3.
- 4.

In these topics, please tell me about:

- | | | | | | |
|----|--------------------------------|------|--------------------------|-----|--------------------------|
| 1. | New books, articles and videos | Yes. | <input type="checkbox"/> | No. | <input type="checkbox"/> |
| 2. | Bibliography | Yes. | <input type="checkbox"/> | No. | <input type="checkbox"/> |
| 3. | Article Alert | Yes. | <input type="checkbox"/> | No. | <input type="checkbox"/> |

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