



Registration

Photographs

1x1 Sizes

پښتواکېډمۍ بلوچستان کوټه

Reg. Form No.:

Name: _____ Father Name: _____

Date of Birth: _____ CNIC: _____

Mobile No.: _____ Institution Name: _____

Postal Address: _____

Permanent Address:

Purpose of Joining Pashto Academy Library:

Declaration:

I have read library and academy rules and regulations (overleaf) and therefore undertake that I will not disobey the rules or any damage to library and academy assets. In that I shall be liable to pay the monetary value (if any). (Detailed rule printed at Back of this Form)

Signature: _____

Date: _____

For Official Use Only

Registration Form No: _____ Date of Registration: _____

Expiry of Registration: _____ Security Amount Paid: _____

Monthly Fee: _____ Signature of Librarian: _____

Signature of President: _____