



**Indian Maritime University**  
**Mumbai Port Campus**  
**(LBS & MERI)**  
**IMU-MPC LIBRARY**

**Library Membership Form**

**Please attach  
Recent  
Photograph**

Sr. No. \_\_\_\_\_

Date \_\_\_\_\_

**Personal Information (Capital Letters)**

Name in Full Mr. / Mrs. /Miss: \_\_\_\_\_

Designation: \_\_\_\_\_

Course Details (Name & Duration): \_\_\_\_\_

Present Address: \_\_\_\_\_

Telephone No: O: \_\_\_\_\_ R: \_\_\_\_\_ M: \_\_\_\_\_

Email ID: \_\_\_\_\_

Signature of applicant

I authorized that Mr./Mrs./Miss: \_\_\_\_\_ May be  
given library books on membership registration.

**OIC Academics**

**Director**

**For Library Use Only**

Membership ID: \_\_\_\_\_

Membership Approved/Not Approved:

**Assistant Librarian**