**Dr. Y S Parmar University of Horticulture & Forestry**

 **Satyanand Stokes Library, Nauni, Solan(HP) 173230**

**Membership Form for the Staff**

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**FATHER’S/HUSBAND’S NAME**

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**DESIGNATION**……………………………………..**DATE OF BIRTH** ………………………………………………………

BLOOD GROUP…………………………………….....E-MAIL ADDRESS…………………………………………………..

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**( Signature with stamp)**

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 **DR. Y S PARMAR UNIVERSITY OF HORTICULTURE AND FORESTRY**

 **SATYANAND STOKES LIBRARY, NAUNI-SOLAN 173 230 HP**

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