

# Library Membership Form

1. Personal Details*		[ ۱. شخصي معلومات ]	
Full Name:			قۇبۇر نامى:
DOB (dd/mm/yyyy):			تۇغۇلغان كۈنى (يىل/ئاي/كۈن):
Gender:	Male <input type="checkbox"/> ئەر Female <input type="checkbox"/> ئايال	NID/PP No:	تىزىملىك نومۇرى / ئۆتكۈزگۈچ نومۇرى:
Address (P):			قاراش جايى (ئۆي):
Address (T):			قاراش جايى (تەشكىلات):
Mobile:			تېلېفون نومۇرى:
Email:			ئېلخانىسى:

<b>2. Member Declaration (if applicant is 18 years or above)</b>	<b>2. دۇشمەن تەقدىراتى (ئەگەر ئىشلىتىشچى 18 ياشتىن ئېشىپ كەتسە)</b>
<p>                     I declare that the information given on this form is complete and accurate. I acknowledge the submission of inaccurate or incomplete information can result to delay the process and may result in the cancellation of the membership. I have read and accept the terms and conditions of the library membership.                 </p>	
Signature: _____	Date (dd/mm/yyyy): _____

<b>3. Parent's or Guardian's Details</b> (if applicant is under 18 years)	3. ප්‍රේමානන්දා ධර්මසේන (දරුවාගේ මව 18 වැනිදා ප්‍රේමානන්දා ධර්මසේන)
<b>Full Name:</b> _____ පුරුෂයාගේ නම: _____	
<b>NID/PP No:</b> _____ ජාතික හැඳුනුම්පත් අංකය: _____	
<b>Relationship with the Applicant:</b> _____ දරුවාගේ සමඟ සම්බන්ධතාවය: _____	
<b>Address (P):</b> _____ (if different from applicant) (දරුවාගේ සිට වෙනස් නම්) _____ (පිටිවෙල)	
<b>Contact Number:</b> _____ දුරකථන අංකය: _____	
<b>Email:</b> _____ විද්‍යුත් තැපෑල: _____	

<b>4. Parent's or Guardian's Consent &amp; Declaration</b>		<b>4. مَخْرُوجُ الْوَالِدِ أَوْ الْوَالِدَةِ</b>
<p>I declare that the information given on this form is complete and accurate. I acknowledge the submission of inaccurate or incomplete information can result in delays in processing the form and may result in the cancellation of the membership. I have read and accept the terms and conditions of the library membership.</p> <p style="text-align: center;">Date _____</p> <p>Signature: _____ <span style="float: right;">مُعَيَّنٌ (أَبُو/أُمُّ) :</span></p>		

Note: All fields marked with asterisks (\*) must be completed

[illegible]

Items to submit with the application form:

- ١ | جـ سـ حـ خـ دـ ذـ رـ زـ سـ شـ صـ ضـ طـ ظـ عـ فـ قـ كـ غـ لـ مـ نـ هـ وـ يـ ا

حِرْزُ حِرْزِ

- قمر، بحر، ۱، ۲۷۵ (دور، دور، دور) لا یورق \*

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- [illegible]

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 ۱۸۸۸

حِرْقُورِسْ

- $\frac{d}{dt} \left( \frac{1}{2} m v^2 \right) = \frac{d}{dt} \left( \frac{1}{2} m \dot{r}^2 \right) = m \dot{r} \ddot{r}$

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- $\frac{d}{dt} \left( \frac{1}{2} m v^2 \right) = \frac{1}{2} m \frac{d}{dt} (v^2) = m v \frac{dv}{dt} = m v a$
- $\frac{d}{dt} \left( \frac{1}{2} m v^2 \right) = \frac{1}{2} m \frac{d}{dt} (v^2) = m v \frac{dv}{dt} = m v a$

\* بَیِّنَاتٌ لِّیَسِّرَ لِّلْغَنَى ۖ وَفُتُوحٌ لِّیَسِّرَ لِّلْغَنَى ۚ اِسْمُکَ یَسِّرُ لِّلْغَنَى ۚ

OFFICE USE ONLY									
<b>Received by:</b> _____	<b>Membership No.:</b> <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>								
<b>Staff RC. No.:</b> _____	<b>Receipt No.:</b> _____								
<b>Date:</b> <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px; height: 20px;">DD</td> <td style="width: 20px; height: 20px;">-</td> <td style="width: 20px; height: 20px;">MM</td> <td style="width: 20px; height: 20px;">-</td> <td style="width: 20px; height: 20px;">YYYY</td> </tr> </table>	DD	-	MM	-	YYYY	<b>Time:</b> _____			
DD	-	MM	-	YYYY					
<b>Signature:</b> _____									