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ЧИТАТЕЛЬСКИЙ БИЛЕТ

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№

Фамилия

Имя

Отчество \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Является читателем данной библиотеки

с \_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_ г.

Дата перерегистрации

Правила библиотеки знаю и обязуюсь выполнять

Подпись читателя \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_