



Membership Application Form

Whitfords Rainbow Toy Library
 Incorporation No: A1004205Y
 Whitford Family Centre
 21c Endeavour Road, Hillarys
 www.whitfordstoylibrary.org.au

Full Name: _____

Address: _____

Phone No: (Home) _____ (Mobile) _____

Email: _____

Driver's license no: _____ **License number must be confirmed by a member**

To assist with **roster planning** please indicate if you will be unavailable for duty for any period during the year, eg. holidays, pregnancy.

A 3-month grace period, if necessary, is given after the birth of a child. Please advise of approximate dates below.

Not available: _____ **Due to:** _____

Where did you find out about the Whitfords Rainbow Toy Library?
 Friends/Family Toy lib website Community directory
 Flyer at..... TLA Newspaper article Whitfords Family Centre Other.....

PLEASE READ CAREFULLY AND SIGN BELOW IF YOU AGREE

- Whitfords Rainbow Toy Library is a not-for-profit community organisation, managed and staffed by its unpaid member volunteers.
- I understand that I shall receive 50% refund of the membership fee if I resign within four weeks of joining and 0% thereafter.
- I have received and read a copy of the Whitfords Rainbow Toy Library Terms and Conditions of Membership. I understand the obligations of membership, and agree to abide by them.
- I hereby agree that all toys borrowed by myself shall receive reasonable care whilst in my possession and shall be returned at the end of the borrowing period in a clean and dry condition.
- I hereby agree that borrowed toys remain, at all times, the property of the Whitfords Rainbow Toy Library and that I am liable for the payment of costs, up to the replacement value of the toy, for toys that are damaged, lost, stolen or unreturned whilst borrowed by me.
- I hereby agree to accept the penalties and/or fines for the late return, loss or damage of borrowed toys as set out in the Whitfords Rainbow Toy Library Terms and Conditions of Membership.
- I hereby agree to advise the Whitfords Rainbow Toy Library Membership Secretary, as soon as possible, of any changes in membership details eg. change of address, email, phone numbers etc.
- I consent for the information supplied on this form to be stored on the Toy Library database and to be used for Toy Library purposes only.
- I hereby indemnify the Whitfords Rainbow Toy Library against any claim, loss, damage or liability whatsoever arising as a result of using the Toy Library service including injury arising from using borrowed toys at my home or elsewhere.
- I hereby apply to be a member of the Whitfords Rainbow Toy Library.**

Membership \$75 full year membership (Jan-Dec)
 Membership \$75 full year membership (Jul-Jun)
 Membership \$45 half year membership (Jul-Dec)

Payment is via CASH or BANK TRANSFER
Account Name: Whitfords Rainbow Toy Library
BSB: 066-160 Account Number: 10126315
Please note, toys cannot be borrowed until payment is made.

Signature: _____

Date: _____

TOY LIBRARY MEMBER WHO PROCESSES THIS APPLICATION:		NAME: _____	
Membership received \$:	Date:	Please circle: BANK OR CASH	
Driver's license sighted and number confirmed: YES <input type="checkbox"/> NO <input type="checkbox"/>		For CASH payments only: Receipt No _____	

MEMBERSHIP SECRETARY:		RENEWAL OF MEMBERSHIP:		\$ Paid	Date Paid	Cash/B ank
(Upon joining)	(Upon cancellation)	Year	Payment			
Mibase entered	Received in writing					
Payment Mibase	Fines paid					
Hotmail entered	Mibase delete					
Membership file	Hotmail delete					
Email Roster Sec	Email Roster Sec					