



CHARLTON TOY LIBRARY MEMBERSHIP FORM



Joining Charlton Toy Library

To join Charlton Toy Library please complete the below form. Here at Charlton Toy Library, we take your privacy seriously. We will store your details safely and will only use the information you provide to administer your membership with us.

Child's Surname:			
Child's First Name:	1. m/f	2. m/f	3. m/f
Child's Date of Birth:	1.	2.	3.
Address:	Post Code:		
Telephone:		Email:	
Parent/Carer's Name:			
Relationship to child:			

Monitoring Information

We ask you to provide the following information to help us with our reporting and monitoring. This is optional and we will not share this information with any other organisation.

1) Please tell us if the child's family receives any income-related benefits?					
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say					
2) Please tell us the child's ethnic background					
A) WHITE	B) BLACK	C) ASIAN	D) MIXED		
A1 British	B1 Caribbean	C1 Indian	D1 White/Black Caribbean		
A2 Irish	B2 African	C2 Pakistani	D2 White/Black African		
A3 White Other	B3 Black Other	C3 Bangladeshi	D3 White/Asian		
		C4 Asian Other	D4 Other Mixed		
E) Any other ethnic group (please specify)					
3) Please include any languages spoken by the child:					
4) Are you a lone parent? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say					
5) Are you a teenage parent? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say					

Please turn over. Continued on the other side.

Monitoring Information continued

6) Are you, the child(ren) or anyone in the child's family a disabled person or person with specific needs?

Yes No Prefer not to say

If yes, please provide more information below:

How you did you find out about us?

How you would like to hear from us

We will contact you about your membership, for example, about overdue toys and the Annual General Meeting (a legal requirement of registered charities). In addition, we would like to contact you about our work, events and news, as well as the community work that your membership supports. Please let us know what you would like to hear about and which methods of communication you would prefer us to use:

Email Phone Post

I would like to receive:

Members e-Newsletter Members surveys Information on events

You can view our privacy policy at www.charltontoylibrary.org.uk and update your preferences at any time by contacting info@charltontoylibrary.org.uk.

Your membership

I would like to join Charlton Toy Library for 6 months / 1 year (delete as appropriate).

I would like to make an additional donation of £_____

The total amount to be paid is £_____

Gift Aid

Please fill out separate form

Signature for Acceptance and understanding of Terms and Conditions

All toys, books and equipment are borrowed on the understanding that they will be used correctly and returned in good condition. Items are borrowed at the borrowers own risk. CTL accepts no liability for misuse.

Signed

Date

FOR OFFICE USE ONLY:

Paid: £25.00 £15.00 £7.50

Proof Seen:

Member no:

Start Date:

Renewal Date:

Initials of Staff:

Renewed :