Newcastle Action for Parent and Toddler Groups Initiative

Toy Library Membership (Schools)

Name of school

|  |  |
| --- | --- |
| Name |  |
| Address |  |
|  |  |
| Postcode |  |
| Telephone |  |

Name of Contact

|  |  |
| --- | --- |
| Name |  |
| Positition |  |
| Email |  |
| Name of Insurer |  |

Agreement and Signature

The information I have supplied is true and complete. I agree to abide by the toy library terms and conditions

|  |  |
| --- | --- |
| Name (printed) |  |
| Signature |  |
| Date |  |

To be completed by NAPI

|  |  |
| --- | --- |
| Level of membership |  |
| Membership Number |  |
| Date joined |  |
| Member signed terms and conditions |  |
| Fee paid |  |

Thank you for completing this application form