



Toy Library Registration Form

Name of setting _____

Staff name: _____

Address _____

Email address: _____

Telephone number: _____

I have read the aims and agreement of the toy library and agree to the conditions.

*** Please note children should not be left alone with the drawstring bag as it may be a choking hazard***

Signature: _____ Date joined: _____

For office use

Membership number _____

£10.00 annual membership fee

Date paid: _____

Renewal date: _____ Date paid: _____

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Renewal date: _____ Date paid: _____

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