



Parent 1: \_\_\_\_\_  
First Name Surname

Address: \_\_\_\_\_  
Suburb Postcode

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_ Occupation: \_\_\_\_\_

Additional Skills/Special Interests \_\_\_\_\_

Parent 2: \_\_\_\_\_  
First Name Surname

Address: \_\_\_\_\_  
Suburb Postcode

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_ Occupation: \_\_\_\_\_

Additional Skills/Special Interests \_\_\_\_\_

Where did you hear about Richmond Toy Library? \_\_\_\_\_

Are you interested in joining the committee?  Yes  No

### YOUR CHILD'S DETAILS

Name	Sex	Date Of Birth

### IDENTIFICATION

Drivers License Number: \_\_\_\_\_

Concession Health Care Card Number: \_\_\_\_\_

### VOLUNTEER DUTIES

As a part of your membership you are required to volunteer for 2 duties per year. In the event that you do not complete your 2 duties for the year you may be asked to assist with either a Fundraising event or the Annual Stocktake. Your volunteer deposit will be refunded after a shift is completed (\$20 per shift).

I understand if I do not complete my volunteer duties within 12 months of sign-up my deposit will be donated to RTL.

**Please read and sign our Terms and Conditions of borrowing overleaf.**



## CONDITIONS OF MEMBERSHIP

I, the undersigned, agree to borrow items from the Richmond Toy Library under the following terms and conditions as outlined in the Richmond Toy Library Policy:

1. I agree to return all items within the prescribed borrowing period.
2. I agree to return all items in a clean and hygienic condition.
3. I agree to pay all charges for late return of items.
4. I agree to pay for all damage or loss that occurs to any item while in my possession and that the loss or damage may result in charges in excess of \$100.
5. I understand that the ability to borrow items may be revoked temporarily, or forfeited completely for the following reasons:
  - Failure to return items
  - Failure to pay fees for overdue, lost or damaged items
  - Consistently returning items in an unhygienic or dirty condition
6. I understand that I am required to renew my membership each year. All memberships which have not been renewed within three months of expiry will be considered ceased.

I acknowledge that it is a condition of borrowing that I will not hold the Richmond Toy Library responsible for any accidents, harm and/or loss suffered by any person which may arise as a result of having borrowed any item from the library, whether or not that damage is caused by any fault or negligence on the part of Richmond Toy Library.

**HELMET WAIVER INFORMATION HAS BEEN SEEN AND READ.**

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The Richmond Toy Library collects information for the purpose of registering your details for the Toy Library. The information will be used for administration purposes. No information will be disclosed to any other party.

## OFFICE USE ONLY

Date Joined: \_\_\_\_/\_\_\_\_/\_\_\_\_

Type of Membership: FULL / CONCESSION

Amount Paid: \$ \_\_\_\_\_

Volunteer Deposit Paid: