



TOY LIBRARY INDIVIDUAL SUBSCRIPTION FORM

Subscribers Name: _____

Sex: Female: [] Male: []

Address: (Please bring Proof) _____

Phone No: _____

Email Address: _____

In addition to my subscription fee I would like to make a donation to the WPPA
Toy Library of;

£5.00 [] £10.00 [] £20.00 [] Other amount: _____

Cheques made payable to WPPA.

I accept the subscription conditions stated in the Toy Library Leaflet. I acknowledge that the Toy library cannot be held responsible for any damage or injury resulting in misuse, unsupervised use, or accidental faults of the toys or equipment once it has been removed from the Library.

Date: _____ Signature: _____

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TO BE COMPLETED BY THE TOY LIBRARIAN

Subscription Fee £12.50 paid by: Cheque [] Cash [] Donation [] _____

Subscription No: _____ Date Joined: _____

Proof of Address checked: []

Toys checked out on joining: _____

OPTIONAL ADDITIONAL INFORMATION

This information is for statistic purposes only and will be treated in the strictest confidence

Subscribers age range: under 18 [] 18-25 [] 26-35 [] 36-45[] 46-55[] over 56 []

Subscribers relationship to child/children:

Parent [] Childminder [] Nanny/Sitter [] Other [] Please specify

Subscribers Ethnic Origin:

Asian:

- Bangladeshi []
- Chinese []
- Indian []
- Pakistani []
- Other []

Black:

- African []
- British []
- Other []

White:

- British []
- European []
- Other []

Mixed Race []

Language/languages spoken at home:

Children:

- | | | | |
|-----------------|----------|------------|------------|
| 1 st | Male [] | Female [] | Age: |
| 2 nd | Male [] | Female [] | Age: |
| 3 rd | Male [] | Female [] | Age: |
| 4 th | Male [] | Female [] | Age: |

Do you consider your child/children having any form of disability?

No [] Yes []

Where did you hear about the WPPA Toy Library?

Friend [] Library [] Clinic [] Playgroup/Day Care [] Press []

Other [] Please specify.....