

**Kelowna Child Care Society**  
**Membership – Parent/Community - April 1<sup>st</sup>, 2017 to March 31, 2018**

Membership Information:	
<b>Membership Name:</b>	
<b>Community Program/Business Name:</b> <i>(If applicable)</i>	
<b>Community Program/ Business Website:</b> <i>(If applicable)</i>	
<b>Full Address:</b>	
<b>Full Mailing Address:</b> <i>(If different)</i>	
<b>Email Address:</b>	
<b>Phone No.(s)</b>	

Please select	
<input type="checkbox"/> I have never been a member	<input type="checkbox"/> I was a 2016/2017 member
Early Childhood Education (ECE)	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Please Note:**

Membership year runs April 1<sup>st</sup> – March 31<sup>st</sup>. Memberships can be purchased at any time throughout the year.

1. Membership forms, with payment, will be processed within 7 business days of receipt
2. Memberships cannot be processed without payment or missing information
3. Society documents (e.g. By-Laws) are available at the KCCS office

**Membership Acknowledgement and Consent**

1. I, the undersigned member, am in agreement with the following as shown by my signature below:
  - Complete Membership forms and pay my membership fee as per my membership type
  - Provide consent for copy of photo ID for lending library database
2. KCCS follows the Personal Information Protection Act (PIPA), Ministry of Citizens Services, BC
  - Information is used for KCCS reporting/statistics (identifying information will not be published)
  - Information is used for the purpose of maintaining membership Member Registry and Library Database
3. To ensure that Kelowna Child Care Society is following and abiding CASL legislation we require updated information from you. Please take a moment to either provide your consent or withdrawal to continue emailing you.

*For more information on CASL legislation, please visit <http://fightspam.qc.ca/eic/site/030.nsf/eng/home>*

- I give consent*, for Kelowna Child Care Society to send emails to update on Workshops, Newsletters, Training, and Resources
- I withdraw my consent* and want to be removed from the email list. Please provide email address and name to be removed: \_\_\_\_\_

Printed Name /Agency Name	Signature	Date Signed

**OFFICE USE ONLY**

FORMS REC'D(M/D/Y) \_\_\_\_\_ BY: \_\_\_\_\_ ~ PAYMENT REC'D \_\_\_\_\_ BY: \_\_\_\_\_ ~ MEMBERSHIP PROCESS COMPLETED \_\_\_\_\_ BY: \_\_\_\_\_

<input type="checkbox"/> ID COPIED	<input type="checkbox"/> CCP DATABASE	<input type="checkbox"/> LIBRARY	<input type="checkbox"/> DEPOSIT	<input type="checkbox"/> RECEIPT	<input type="checkbox"/> SCAN
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**Kelowna Child Care Society**  
**Membership – Parent/Community - April 1<sup>st</sup>, 2017 to March 31, 2018**

**TYPE OF MEMBERSHIPS**

I (your name) \_\_\_\_\_, am requesting the below type of membership

**1. Parent : Mother, Father, legal guardian, or Foster Parent**

Membership Services Include:

- Access to Toy & Resource Lending Library
  - Ages 0-12 years
  - Includes infant/toddler equipment, indoor and outdoor toys
  - Resources
- Support choosing developmentally appropriate toys/activities
- Parent Training & Workshops - member price (member + 1)
- Monthly Bulletin and Quarterly Newsletter by e-mail
- Community Resource Referrals
- KCCS Voting Privileges at AGM

**Parent** \_\_\_\_\_ \$35.00

**2. Community: CHILD CARE I - Single membership**

- ALL of the above; with
  - Access to Toy & Resource Lending Library – *member only*
  - Training & Workshops - member price – *member only*

**ECE Student** \_\_\_\_\_ \$35.00  
**Post-Secondary Student** \_\_\_\_\_ \$35.00  
**ECE/Child Care Professional** \_\_\_\_\_ \$35.00  
**Informal Provider (not Licensed or Registered)** \_\_\_\_\_ \$35.00

**3. Community: CHILD CARE II – Program membership**

- ALL of the above; with
  - Access to Toy & Resource Lending Library - *member discretion*
  - Training & Workshops - member price - *member+2*

**Program** \_\_\_\_\_ \$40.00

**4. Community: AGENCY I - Single membership**

- ALL of the above; with
  - Access to Toy & Resource Lending Library – *member only*
  - Training & Workshops - member price – *member only*

**Non-Profit** \_\_\_\_\_ \$45.00  
**Community Committee** \_\_\_\_\_ \$45.00  
**Business** \_\_\_\_\_ \$50.00

**5. Community: AGENCY II – Agency membership**

- ALL of the above; with
  - Access to Toy & Resource Lending Library - *member discretion*
  - Training & Workshops - member price - *member+2*

**Non-Profit** \_\_\_\_\_ \$50.00  
**Community Committee** \_\_\_\_\_ \$50.00  
**Business** \_\_\_\_\_ \$55.00

**Payment Options:     Cash         Cheque**

- Make cheques payable to "Kelowna Child Care Society"
- Please make note of program in notes section of cheque for admin reference
- Memberships will only be processed when payment and completed membership forms are received

**Mail or drop off membership forms, with payment, to:**

Kelowna Child Care Society  
 #4-1890 Ambrosi Rd.  
 Kelowna BC V1Y 4R9



**CHILD CARE RESOURCE AND REFERRAL PROGRAM (CCRR)**

**Toy Lending and Resource Library loan contract**

The Kelowna Child Care Society retains full and complete ownership of any product or item(s) being borrowed from the CCRR Toy Lending and Resource Library. I agree to release, save harmless, and indemnify the Kelowna Child Care Society and programs from and against all claims, actions, costs, expenses and demands in respect to death, injury, loss or damage to person or property, arising out of, or in connection to, the CCRR Toy Lending and Resource Library.

Initial \_\_\_\_\_

I agree to only use resources that are developmentally-appropriate and/or follow the recommended ages for the children. Resources will only be used under my direct supervision.

Initial \_\_\_\_\_

Upon borrowing a resource, I understand that it is my responsibility to ensure all pieces are present. If there are discrepancies, I will notify CCRR within 48 hours.  
 I agree that I will return the item(s) in the condition as to which it has been borrowed.  
 I will periodically check the item(s) for damage, and if found, I will return the item(s) to the CCRR Toy Lending and Resource Library and discontinue use.

Initial \_\_\_\_\_

I agree that I will return the item(s) within the borrowing time period (1 month) and understand that there is a \$2.00 per day late charge if the item(s) are not returned on time.  
 I understand that after my third time returning an item late, my borrowing privileges will be suspended for no less than one month.

Initial \_\_\_\_\_

I agree that I am responsible for the replacement of any resources I have lost or damaged. The replacement cost will be determined by CCRR. This replacement fee will be payable within a week upon receipt of an invoice from CCRR. I understand that in the event that I have any outstanding fees or overdue items, lending privileges will be suspended until the fees are paid in full and all items are returned.

Initial \_\_\_\_\_

I (*print name*) \_\_\_\_\_ give permission for the following staff/family to borrow resources under my membership. I understand that all conditions and responsibilities outlined in this agreement apply and I am fully responsible for all items picked up by staff/family on my behalf.

- Please note only those that are listed on this form will have access to the lending library.
- Updates and/or changes to this list are your responsibility.

Print First and Last Name	Email	Relationship to you

I, the undersigned, acknowledge my borrowing privilege, responsibilities, and obligation in this by my signature.

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