

Professional / Centre Membership Form

New Application Renewal

Please complete the following section with the details of our main contact for this application. This would be yourself as a Professional, or the Centre Manager.



Centre Name: (if appropriate)

Full Name:

Address:

(including Postcode)

Email Address:

Daytime Phone No:

Mobile Phone No:

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Do you consent to us using your email address to keep you up to date with news and play opportunities/

Yes

No

This application will make you a Registered Member of The Play and Leisure Opportunity Library, which will give you the option of voting in our AGM, etc. as detailed in the Membership Guidelines. Should you wish to opt out, please tick the following box

Beneficiaries:

Please complete the following to provide information on those benefiting from the membership.

Number of persons:

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| |
|--|

Age range:

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|--|
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|--|

Ethnicity:

White: _____

Mixed: _____

Asian/Asian British: _____

Black/Black British: _____

Other: _____

Please also provide an indication of the range of diagnoses / conditions of those benefiting:

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Signed:

Date:

Membership Fee: £30 (Professional)

£60 (Centre)

Method of Payment: Cash

Standing Order

Cheque (payable to 'The Play and Leisure Opportunity Library')

Please return this form along with appropriate payment to our registered charity address: The Play and Leisure Opportunity Library, Forge Fach Community Resource Centre, Hebron Road, Clydach, Swansea, SA6 5EJ.