

TOY LIBRARY ASSOCIATION OF SOUTH AFRICA (TLASA) - MEMBERSHIP APPLICATION/RENEWAL

Name: _____ Mrs. Mr. Ms. Prof. Dr. _____
 Toy Library/Organisation/Company (if applicable) _____
 Postal Address: _____ Postal code: _____
 Street Address: _____
 Telephone No: _____ Fax No. _____
 Cell No: _____ E-mail address: _____

WHO SHOULD JOIN?

Toy libraries; toy manufacturers both wholesalers and retailers; organisations and individuals interested in promoting play; government departments and individuals involved in any aspect of child development; persons supporting children’s right to play.

MEMBERSHIP BENEFITS

1. Discounts on training offered by TLASA.
2. Quarterly regional workshops.
3. Quarterly newsletter.
4. Access to website information which is exclusive to members.
5. Toy Library Conference.

MEMBERSHIP FEES

			ENTER AMOUNT BELOW
MEMBERSHIP	Individual	R 210.00	
	Group (Up to 4 persons)	R 460.00	
TOTAL PAID			

SIGNATURE..... DATE: _____

Bank Deposit or Transfers: **Please put your surname/organisation as the reference on the deposit/transfer.**

Please fax/post/email a copy of your proof of payment and this application form to Cotlands:

Fax No. (011) 683-6688 or E-mail: toylibrary@cotlands.org

Account Name: Cotlands
 Bank: Standard Bank
 Branch: The Glen Branch Code: 00-60-05
 Account Number: 200045288

NB: We need your application form so that we can confirm your membership.

Toy and Leisure libraries, toy manufacturers, wholesalers and retailers

I agree that the name, address and telephone number of _____

Toy Library/Organisation/Company may be placed on a list issued by Cotlands for the benefit of anyone wanting to make contact with Toy Libraries or Toy Suppliers.

Signed: _____ Position: _____

PLEASE SEND US A BRIEF DESCRIPTION OF YOUR TOY LIBRARY AND THE COMMUNITY YOU SERVE.

“A TOY LIBRARY WITHIN REACH OF EVERY CHILD”