

OFFICE USE	
Registration date	
Signed	



Annual Registration Form

Application for Membership of St Ives Occasional Care Centre Inc

Please tick one:	<input type="checkbox"/>	New Membership
	<input type="checkbox"/>	Change in Details
	<input type="checkbox"/>	Renewal

I am applying to be admitted as a Parent member of the St Ives Occasional Care Centre Inc (SIOC) and I have a child currently enrolled at the Centre. Please find my details below:

Title: Mr, Mrs, Ms, Dr etc	Given Name:	Family Name:
Address:		Postcode:
Home Phone:	Work Phone:	Mobile:
Email:		

Please tick to agree that you have read and understood the two statements below:

<input type="checkbox"/>	I understand that as I am a parent or guardian of a child at the Centre that I will be automatically entitled to voting rights at the Centre as well as at General Meetings of SIOC.
<input type="checkbox"/>	I agree to abide by the Constitution of SIOC Inc. (Available at the Centre)

I understand and agree that one parent or Guardian of a child with a preferred booking will be required to join the St Ives Occasional Care Committee and to attend a minimum of 4 of the 8 meetings per annum.	Yes	Signature:
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Annual registration is \$100 per family.
This fee registers your family as a member of SIOC for a full 12 months, from the date of payment.
This payment is to be made prior to your child's first 'unaccompanied' visit to the centre.
Please note that this registration fee is not refundable under any circumstances.

Signature:	Date:
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Office Use Only					
Paid by: Please circle one.	Cash	Visa	Mastercard	EFTPOS	Other Please state: