

Group Membership Form 2009 - 2010



Please note this membership year will run from 1 November 2009 to 31 August 2010 and the fee will reflect this.

As an alternative to completing this form and to avail of an additional **10% Discount** you can renew your membership online at www.early-years.org/membership

Group Membership covers any providers of group based early years care and education, who support the Values and Principles of Early Years.

Please tick as applicable:

New Member OR Membership Renewal Membership No

It is very important that you complete ALL sections of this form.

<p>Group Details (Please ensure you give full address including postcode)</p> <p>Group Name: _____ _____</p> <p>Address: _____ _____ _____</p> <p>City/Town: _____</p> <p>County: _____ Postcode: _____</p> <p>Telephone: _____</p> <p>Fax: _____</p>	<p>Correspondence Details (Where possible this should be the Group Leader/Manager)</p> <p>Contact Name: _____</p> <p>Contact Position: _____</p> <p>Address: _____ _____ _____</p> <p>City/Town: _____</p> <p>County: _____ Postcode: _____</p> <p>Telephone: _____</p> <p>Fax: _____</p> <p>Mobile: _____</p>
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Is your group registered with Social Services? _____

How many children are you registered for? _____

How many children are on your roll? _____

How many special needs children are on your roll? _____

Does your setting have a waiting list for places? _____

What is the age range of children attending? From _____ Years _____ Months To _____ Years _____ Months

Have many employees do you have? _____

Is your group run by a Committee? _____

If yes, please complete the following:

<p>Chairperson (Please ensure you give full address including postcode)</p> <p>Name: _____</p> <p>Address: _____ _____ _____</p> <p>City/Town: _____</p> <p>County: _____ Postcode: _____</p> <p>Telephone: _____</p> <p>Fax: _____</p> <p>Mobile: _____</p> <p>Email: _____</p>	<p>Treasurer (Please ensure you give full address including postcode)</p> <p>Name: _____</p> <p>Address: _____ _____ _____</p> <p>City/Town: _____</p> <p>County: _____ Postcode: _____</p> <p>Telephone: _____</p> <p>Fax: _____</p> <p>Mobile: _____</p> <p>Email: _____</p>
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How many Committee Members do you have? _____

Opening Hours

Insurance Details

Days Open	From	To	<p>Does your setting avail of the discounted Early Years/Lockton Insurance Scheme? _____</p> <p>If No, please state:</p> <p>Name of Insurance Company: _____</p> <p>Type of Insurance: _____</p> <p>Renewal Date: _____</p>
Mon			
Tue			
Wed			
Thu			
Fri			
Sat			
Sun			

If you would like to avail of the discount on insurance offered through Lockton Ltd (formerly Alexander Forbes) to Early Years members, please contact Roisin McIlvenny at Lockton, Tel. 028 9024 8989.

Please give the following Information as accurately as possible:

Education and Library Board: _____

Local Council Area: _____

Childcare Partnership: _____

Trust: _____

Is your setting PEEP/PEAG funded? _____

Is your Group in a Sure Start area? _____

Data Protection

Early Years provides a free service to members of the public whereby we can provide them with details of our member groups in their area for the purposes of finding childcare. This can include an online search.

Please tick this box if you do not wish your details to be provided for this purpose.

Please Note: We do not release members' details for any other purpose (eg external mailings).

An increasing amount of information from Early Years is delivered in electronic form. If you wish to receive some information in this format, please indicate below.

I agree to receive information and documents in electronic form. I reserve the right to withdraw this permission at any time.

print name	signature	position in organisation
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If you have given permission for electronic communication (above) please supply an up to date email address:

Email Address: _____

Membership Fees

It is very important that you indicate accurately which service(s) you offer. Please refer to the attached list of definitions for clarification.

Additional Services or Sites

Where a member wishes to register more than one service or premises which are under the same ownership, a 10% discount will be applied to each additional service. You must complete a separate membership form for each service or premises, return the forms together and clearly state on each application form which other setting(s) or service(s) each membership application relates to. You can then apply the 10% discount to each additional setting.

NB You must pay the full membership fee for one service or setting, the value of which should be greater than or equal to any additional settings being discounted.

	Fee (inc VAT)	Amount Due
Parent and Toddler	£21.00	_____
Playgroup	£53.00	_____
Creche	£53.00	_____
Out of School Club	£53.00	_____
Full Day Care	£75.00	_____
Nursery School/Unit/Class	£35.00	_____
Foundation Stage (Year 1 or Year 2 Education)	£35.00	_____

Integrated Family Centre

£92.00

Please tick which of the following services you offer within the Integrated Family Centre:

Parent and Toddler Playgroup Creche Out of School Club

Full Day Care Nursery School/Unit/Class Foundation Stage

Total Fee:

High/Scope Ireland membership

If your setting implements the High/Scope approach you will be eligible for High/Scope Ireland membership included in your standard membership. You must indicate which services are offered (above) and include the appropriate membership payment.

If your setting is eligible for High/Scope Ireland membership please tick this box

Please return this completed form along with membership payment to:

Membership Officer
Early Years - the organisation for young children
6c Wildflower Way
Apollo Road
Boucher Road
Belfast
BT12 6TA

Tel. +44 (0)28 9038 7904

Please make cheques payable to Early Years