COMMUNITY SERVICES
Child Resource Center

Print Form

GROUP MEMBERSHIP APPLICATION

FACILITY/PROGRAM NAME	CONTACT NAME*		TITLE
ADDRESS*			PHONE*
CITY	STATE	ZIP	ACCOUNT E-MAIL*

NOTE: If you provide an e-mail address, you will receive all Child Resource Center (CRC) communication (including membership notifications , quarterly newsletter, upcoming workshops, etc.) via e-mail.

TYPE OF MEMBERSHIP	IRVINE	NON-IRVINE
☐ SMALL SCHOOL (3-9 Staff Members)	$75.00	$80.00
☐ MEDIUM SCHOOL (10-29 Staff Members)	$100.00	$105.00
☐ LARGE SCHOOL (30+ Staff Members)	$125.00	$130.00

MEMBERSHIP AGREEMENT

A. A list of staff approved for use of this membership on program/school letterhead is required for group membership. For the group's protection, individuals not listed as approved staff members on the site's account will not be able to use the site's membership account, unless the membership card is in the individual's possession.

B. One membership card will be issued with each paid group membership.

C. All fees must be paid to maintain membership privileges.

D. If a card is lost or stolen, additional cards may be purchased at the rate of $5.00 each.

E. Members are responsible for the replacement cost of lost, stolen or severely damaged books, CDs, instructional materials or DVDs.

F. The school is responsible for any late fees and/or replacement cost of lost, stolen or severely damaged books, CDs, instructional materials or DVDs.

I CERTIFY THAT I HAVE READ AND UNDERSTAND THE CRC MEMBERSHIP AGREEMENT AND WAIVER AND RELEASE.

MEMBER SIGNATURE* _____ DATE _____

FOR OFFICE USE ONLY

PAID		CARD ISSUE DATE		MEMBERSHIP TYPE			
DATE		EXPIRATION DATE		BARCODE		STAFF INITIALS	