



UNITED CEREBRAL PALSY TOY LIBRARY REGISTRATION FORM



Date: _____
Paid: _____
Scholarship: _____

Child's Name: _____ Birth Date: _____

Diagnosis: _____

Parent or Guardian's name: _____

Military: Yes No

Address: _____

City: _____ State: _____ Zip: _____

Brothers/Sisters; Names & Ages: _____

Phone Number to best reach you at: _____ Is this a Cell Phone? _____

Email: _____

Vision:

Does the child have any difficulty with vision? _____

Hearing:

Does the child have any difficulty with hearing? _____

Gross Motor:

How would you like to see the child grow in this area? _____

Fine Motor:

Are there any improvements you would like the child to work on, in this area? _____

Ethnic Background:

Black/African American White Asian Hispanic/Latino
American Indian Other Unknown



UNITED CEREBRAL PALSY TOY LIBRARY RULES



- 1.) There is an annual registration fee of \$20**
- 2.) Toys are checked out for 2 weeks unless otherwise arranged with Toy Library Coordinator**
- 3.) Please call or email Toy Library Coordinator if you cannot make scheduled time to drop off toys**
- 4.) If toys are requested by another family, the Toy Library Coordinator will contact you to return toys after 2 weeks**
- 5.) Accidents happen –I understand that a donation may be requested if repairs or replacement of the toys are required**
- 6.) Please inform Toy Library Coordinator if there are any problems with a toy**
- 7.) To prevent the spread of germs toys should be returned clean (not disinfected –we will be cleaning and disinfecting all dirty toys on Friday’s). When your child is sick, please mention it to the Toy Library Coordinator.**

Please be mindful when checking out toys. When you fail to return toys on a timely basis, other children who are in the program will be missing out on the toys you have. This program is grant funded and cannot replace toys on a frequent basis.

I have read the above rules and agree to follow them. I understand that if I do not, the Toy Library Coordinator may restrict my opportunities to borrow toys.

Print Name: _____

Signature: _____