

# Membership Application Form



Service Name			
Website Address			
<b>Primary/Service Contact Details</b>		<b>Preferred Contact Method</b> <small>tick as appropriate</small>	
Title		Email	
First Name		Mobile	
Last Name		Landline	
Postal Address		Post	
City		Best time to contact:	
County		Annual Commercial Rates	€
Landline		Maximum Capacity <small>Total No. of Children Allowed</small>	
Mobile <small>To ensure that you receive text alerts</small>		Current No. of Children	
Email <small>To be used for all key communications, alerts and deals</small>		Current No. of Staff	
<b>Manager Contact Details</b>		<b>Manager Role</b> <small>tick as appropriate</small>	
Managers Name		Owner/Manager	
Service Address		Manager	
Landline		Pre-school Leader	
Mobile		Other	
Email			
<b>Age Profile</b>			
18yr - 25yr	35yr - 45yr	55yr - 65yr	
25yr - 35yr	45yr - 55yr	65yr +	
<b>Organisational Type</b>		<b>Company Structure</b>	
Community/ Committee	Individual	Limited Company	
Private	Partnership	Other	
Workplace	Other		
As a member of ECI we will send you information by post, phone, mobile phone, email or SMS.			
We may also permit selected third parties to provide you with information about goods and services which may be of interest to you. Are you happy to receive this information?			Yes No

Please return completed application form to: Early Childhood Ireland, Hainault House, Belgard Square, Tallaght, Dublin 24.

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## Service Offerings (For Service Providers Only)

<b>Breakfast Club</b>	Yes	No
<b>Afterschool</b>	Yes	No
<b>Summer Camp</b>	Yes	No
<b>Homework Club</b>	Yes	No

## Opening Hours (For Service Providers Only)

Please Specify:

## Service Curriculum (For Service Providers Only)

<b>Montessori</b>	
<b>Steiner</b>	
<b>Play-based</b>	
<b>High-Scope</b>	

## Cost Per Week (For Service Providers Only)

<b>Not Specified</b>	<b>Under €100</b>	<b>€100 - €150</b>
<b>€150 - €200</b>	<b>€200 - €250</b>	<b>€250 - €300</b>
<b>€300 - €350</b>	<b>Over €350</b>	

## Membership Details - Membership Period 1 October 2018 – 30th September 2019

<b>Service Providers Membership</b> Running Full Daycare, Sessional, Part Time Daycare, Sessional with Linked School Age, Part Time Daycare with Linked School Age or Standalone Afterschool Service <b>Please Specify:</b>	€200 Discount of 25% (€150) for 2nd & subsequent services	
<b>Parent &amp; Toddler Membership</b> Discount of 25% (€52.50) for 2nd & subsequent services	€70	
<b>Organisational Membership</b>	€200	
<b>Associate Membership</b> Covering all types of Individual Membership including Students	€60	
<b>Registration Fee</b>	€40	
<b>Do you wish to be included in the childcare search on the Early Childhood Ireland website</b>	Yes	No

## Insurance

**ECI Childcare Insurance** Please tick this box if you would like our insurance specialists to give you a call to discuss your needs. If not, please let us know who currently provides your insurance

**Existing Insurance Company**

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Fees			
<b>Cost of Membership</b> See details above		€	
<b>Registration Fee of €40</b> Payable by first time applicants only		€	
<b>GRAND TOTAL</b>		€	
Payment Method			
<input type="checkbox"/> Cheque/PO <input type="checkbox"/> Visa Credit <input type="checkbox"/> Visa Debit <input type="checkbox"/> MasterCard <input type="checkbox"/> Laser (made payable to Early Childhood Ireland)			
Card Number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Security Code:	<input type="text"/>	Expiry Date:	<input type="text"/> / <input type="text"/>
I authorise you to debit my Credit/Debit Card with the amount specified above.			
Card Holder Name:	<input type="text"/>		
Declaration & Signature			
I declare that, to the best of my knowledge and belief the above statements made by me are true and complete			
<b>Signed</b> Early Childhood Ireland Member	<input type="text"/>	<b>Date</b>	<input type="text"/> / <input type="text"/> / <input type="text"/>