

Valley Family Child Care Association  
Lending Library Application

Last Name \_\_\_\_\_ First Name: \_\_\_\_\_ Middle int \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ Ca. zip: \_\_\_\_\_

CDL Identification \_\_\_\_\_ Phone \_\_\_\_\_

License: \_\_\_\_\_

Contacts (Please include 1 family member and friend)

First/last name	Address	Phone
1. _____	_____	_____ (family)
2. _____	_____	_____

Agreement

**I, the undersigned, agree to return all borrowed items on time and in good condition. All toys will be returned sanitized (cleaned with a disinfectant). If an item is lost or damaged, I agree to pay the full purchase price (minimum reimbursement charge \$2.) If the item is no longer available I will buy something similar with at least 2 members of the board approval. I understand that failure to return borrowed items on the due date may result in the loss of my Lending Library privileges. I also agree to use the toy for the intended age. I am responsible to not let small children play with small parts and will be sure to use the item appropriately. You are also responsible to check and see if an item has been recalled..if it has please tell Library coordinator immediately and discontinue using item.**

Signature Date: \_\_\_\_\_ Date: \_\_\_\_\_

VFCCA extends our gratitude to the Center for Health Training as a reciprocate of the 2009 Family Child Care Association Grants Program Award.

VFCCA 8-14-08 #001