

HALTON PLAY CHILDREN'S CHARITY DISCOUNT CARD APPLICATION FORM

**FOR STAFF USE:
EXPIRY DATE**

INDIVIDUALS NAME/COMPANY/GROUP:

ADDRESS:

POST CODE:

PHONE NUMBER:

EMAIL ADDRESS:

Please tick box if you wish not to receive marketing e-mails regarding Halton Play Children's Charity

DISCOUNT CARD SUBSCRIPTION (PLEASE TICK)

INDIVIDUALS & NON-FUNDED GROUPS **(Groups with No Paid Staff)** £9

COMPANIES & FUNDED GROUPS **(With Paid Staff)** £17.00

DISCOUNT CARD DETAILS

I wish to make an application for a Discount Card for Halton Play Children's Charity Resource Centre and understand the following: -

1. I understand that the discount card will be sent by email and is valid for 12 months from the payment date and it is for my personal use only (or the named company/group use where applicable).
2. I will receive 10% discount on all stock and scrap goods in the Resource Centre upon showing a copy of a valid discount card.
3. Goods and services available via the Discount Card from Halton Play Children's Charity Resource Centre are for the use of valid Discount Card Holders only and are not to be used for commercial gain. Signing this form constitutes an agreement of this statement.

Customer Signature:

Date:/...../.....

PAYMENT DETAILS

Payment can be made via cash or card. Invoices only by prior agreement with our administrator.

FOR STAFF USE ONLY:

DATE PAID:/...../.....

AMOUNT PAID: £9.00 £17.00

PAID BY: CASH CARD INVOICE (BY AGREEMENT ONLY)

DATE DISCOUNT CARD EMAILED:/...../..... **SENT BY:**.....

DATE DISCOUNT CARD LAMINATED AND LEFT AT TILL:

(Only if unable to email)/...../.....

