

**Whites Hill State College P&C Association
Volunteer Register**

The P&C Association holds insurance for all volunteers participating in school activities.
All volunteers MUST complete the register for each activity, each day.

Term _____ Event: _____ Area of School: _____ (classroom, facility, activity, event)

Coordinator / Teachers name: (if applicable) _____

Date	Name	Time started	Time finished	Volunteer signature	Location / duties	Blue card Y / N	IF NO I am a Parent of a Child at this event.	I have read the Student Protection Fact Sheet & Food Safety Fact Sheet Please sign	I have rec'd Food/ Drink to the Value of \$5 for my 4 hrs participation

If you are NOT a parent of a child at the school and are not exempt then you MUST have a Blue Card before you can volunteer in any area of the school or its activities. Please check with the person for whom you are volunteering. Completed Volunteer Blue Card Application forms to be submitted to Blue Card Services. The contact in the school to get your application signed is: _____ **Please keep in mind It is an offence to apply for a Blue Card Knowing that you are an excluded person.**