

# BALLARAT ASSOCIATED SCHOOLS (BAS)

## CHILD SAFE REGISTER

*Safeguarding Children and Young People at BAS Events and Activities*



NAME: \_\_\_\_\_

CONTACT DETAILS: Mobile phone: \_\_\_\_\_

Email: \_\_\_\_\_

WORKING WITH CHILDREN CHECK

NUMBER: \_\_\_\_\_

EXPIRY DATE: \_\_\_\_\_

*(please attach a copy)*

BANK DETAILS:

Account Name: \_\_\_\_\_

BSB: \_\_\_\_\_

Account Number: \_\_\_\_\_

Please list any BAS Event/s where you will have interactions with students from the Association's 8 member colleges:

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- I confirm I am aware of and understand the [BAS Children and Young People Safety Policy](#).

➤ YES / NO Please Initial \_\_\_\_\_

*The [BAS Children and Young People Safety Policy](#) is available on the BAS website ([www.bas.vic.edu.au](http://www.bas.vic.edu.au)) or by request from the BAS Executive Officer*

- I confirm I understand and will comply with all [reporting obligations](#) as they relate to mandatory reporting and reporting under the Crimes Act 1958 (Vic)

YES / NO Please Initial \_\_\_\_\_

*The [BAS Reporting Obligations: Children and Young People](#) document is available on the BAS website ([www.bas.vic.edu.au](http://www.bas.vic.edu.au)) or by request from the BAS Executive Officer*

- I confirm I have been provided with a copy of the above [BAS Code of Conduct](#) and have listed any known interactions I will have with students from its member colleges. I will update this list when/if necessary.

YES / NO

Signed: \_\_\_\_\_

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