

## Spinifex State College Mount Isa Parent's and Citizens Association

## PO BOX 361 MOUNT ISA QLD 4825

pandc@spinifexsc.eq.edu.au

## Application for P&C Membership for 20\_\_\_\_

Please complete and return to the P&C Secretary

Name:		
Address:		
Home phone:		
Mobile phone:		
Email address:		
Membership	New membership	Renewing my membership
l am:		
·	a student attending the school	I
<ul><li>□ a staff member of the school</li><li>□ an adult interested in the school's welfare, and my date of birth is</li></ul>		
		-
enrolled at Spir	nifex State College, or who a	a member who are not parents/carers of a child re not Spinifex State College staff, must provide a ard in order for membership to be submitted and
If you are an adult interested in the school's welfare, please provide:		
Current Blue Card number:		
Expiry date:		
	Date of birth*:	
<ul> <li>If applicab College</li> </ul>	le, please provide details of	your children who are students at Spinifex State
	ership in the Spinifex State	College Parents and Citizens' Association and I
<ul> <li>undertake to:</li> <li>a) promote the interests of and facilitate the development and further improvement of the Schoo and the good order and management of the School; and</li> </ul>		
b) comply with the Constitution of the P&C Association, including the P&C Association Code of Conduct as specified in Schedule 2 of the Constitution, and any valid resolutions passed by the Association.		
	n convicted of an indictable off I Provision) Act 2006.	ence, it is grounds for removal in accordance with the
Signature:		
Date:		
P&C Secretary Us	se	
Date received:/		
Secretary's signature:		
Entered in P&C Register. □		

<sup>\*</sup> Date of birth details are required to link with Blue Card portal