



REGISTRATION FORM & ACADEMY MEMBER CONTRACT

(To be completed by student)

clontarf
foundation

The Clontarf Foundation exists to improve the education, discipline, self-esteem, life skills and employment prospects of young Aboriginal and Torres Strait Islander men and by doing so equips them to participate meaningfully in society.

Surname: _____ First Name: _____

Date of Birth: _____ Year Level: _____ Mobile Phone: _____

Address: _____

Parent/Guardian Names: _____

Email: _____

Home Phone: _____ Mobile Phone: _____

ACADEMY CODE OF CONDUCT

- ✓ Respect for all Academy and school staff and peers
- ✓ Respect for Academy and school premises and equipment
- ✓ Attending school and participating appropriately and honestly in all class activities
- ✓ Maintaining a good behaviour record at school
- ✓ Displaying a real commitment to your timetable and school work
- ✓ Attaining agreed benchmarks for all camps/tours and activities
- ✓ Completing allocated tasks and sharing the workload
- ✓ Upholding and displaying the values of the Academy at all times
- ✓ If this contract is broken at any stage, members may be withdrawn from the Academy for a short time until they reassess and re-sign their contract

I, _____ accept the responsibility of being a member of the Academy.

Signed: _____ Date: _____

CAREGIVERS' CONSENT FORM

ACADEMY MEMBER

Academy members participate in a range of activities and events within the local area, both before, during and after school, and on weekends.

The activities include sports matches, tournaments, clinics, community activities, leadership activities, worksite visits, and day excursions.

We require your permission/consent for the following before your son can become a member of the Academy.

	Please circle	
The student identifies as being of Aboriginal and/or Torres Strait Islander descent and is enrolled in the school as such.	YES	NO
I give permission for my son to become a member of the Academy.	YES	NO
I give permission for my son to attend excursions, training, activities and games before, during and after school and at weekends.	YES	NO
I give permission for my son to travel in a team bus, Academy vehicle or Academy staff private vehicle to attend the above or any other Clontarf Academy related visit.	YES	NO

Student's name: _____

Parent/Guardian/Caregiver's Name: _____

Signed: _____ Date: _____

CAREGIVERS' CONSENT FORM

PERMISSION TO PUBLISH

Members of the Academy are often photographed and videoed whilst taking part in activities that focus on the learning areas of Education, Employment, Leadership, Partners, Sport and Well-Being. We require your permission to take and publish these photographs and use the video.

Please note:

- Photographs and video are used by the Foundation to showcase the achievements of Academy members.
- Appropriate photographs and video are carefully selected and approved by Foundation staff prior to publication.
- Photographs and videos will be stored and disposed of securely.
- Should you choose to change your consent or have any queries regarding photographs or videos please speak to your Academy Director.

Please circle

I give permission for photographs of my son to be taken during Clontarf Foundation activities. YES NO

I give permission for my son to be identified by name in publications, newsletters, websites and social media channels. YES NO

I give permission for my son's photograph to be used in Clontarf approved internal publications, newsletters, websites and social media channels. YES NO

I give permission for my son's photograph to be used in Clontarf approved external publications, websites, newsletters and social media channels. This includes use by the Foundation's corporate and government partners. YES NO

Student's name: _____

Academy: _____ Date: _____

Parent/Guardian/Caregiver's Name: _____

Signed: _____ Date: _____

CAREGIVERS' CONSENT FORM

PERMISSION TO CREATE AND UPDATE STUDENT RECORD

The Clontarf Foundation uses a very safe and secure database called the Clontarf Information Management System (CIMS) to maintain a record of each student. CIMS records the personal details of the students and their Academy activity. Please indicate your consent for this record to be created and updated.

	Please circle	
I give permission for the Foundation to create a student record of my son	YES	NO

Student's name: _____

Academy: _____ Date: _____

Parent/Guardian/Caregiver's Name: _____

Signed: _____ Date: _____

What is recorded?

- Student name
- Parent/ caregiver contact information
- Address
- Date of birth
- Resume
- Drivers licence
- Birth certificate
- Attendance at school
- Participation in Clontarf activities, such as work site visits, camps, and excursions
- Employer information
- Alumni activity record
- Life outcome

What is the information collected for?

- Internal purposes to assess and evaluate the effectiveness of the programme
- To measure retention, attendance, year 12 completion, and employment outcomes
- To manage the Foundation's business, such as for budgeting and planning purposes
- For reporting purposes to government partners