

## Galilee Regional Catholic Primary School

## **GPA Registration Form**

*Name:
I wish to become a Member of the Galilee Parents' Association (GPA) in the role of: (Circle role): President # Vice President # Secretary # Treasurer # General
By signing this form, I agree to abide by the GPA's Constitution, the Child Safety Code of Conduct, the School Parent, Guardian, Carer Code of Conduct, Parent Communication Group Guidelines at all times. I will strive to make a positive difference in the school community; act honestly and with integrity; use resources responsibly and appropriately; engage genuinely with the community; comply with relevant legislation and policies; and to treat everyone in a considerate, fair and courteous manner.
# I understand this role has a tenure of two (2) years. After this two (2) tenure, I understand I can become part of the General Committee for a further year (1). I understand that I cannot apply for another executive role after this time.
Address*  Mobile number*  Email*  Child(ren) Name(s) and Year Level(s)*
*Required information

The GPA Secretary is required to maintain a log of registered members of the GPA and their addresses in accordance with the GPA's Constitution.

The Parents' GPA will seek to provide information including meeting agendas and any supporting documentation via email.

Signature	 	 	٠.	 
Date	 	 		

This form will be filed in the school administration and is the property of the School and will be made available when required.