QMS105_35 - PARENT / LEGAL GUARDIAN AGREEMENT

(UNDER 18 CONSENT FORM)

This form is to be completed by the parent/legal guardian of students under the age of 18 years who wish to enrol at Chisholm Institute. (Attach to enrolment forms)

Student ID Number ☐☐☐☐☐☐☐☐☐☐

STUDENT DETAILS

Family Name _____

Given Name (s) _____

Date of Birth (DD/MM/YYYY) ____/____/____ **Age** _____

AGREEMENT OF PARENT OR LEGAL GUARDIAN

By signing this form, I confirm that I am the parent or legal guardian of the above student and that:

1. I acknowledge and agree that the Chisholm Institute ABN 65 335 795 326 (the **Institute**) is an adult learning environment and that I remain primarily responsible for the student's supervision and welfare.

2. I acknowledge and agree that in accordance with the Institute's usual practices, the Institute will communicate with the student and not with me, unless the student otherwise consents or if the Institute considers there is an imminent risk to the student's safety and wellbeing.

3. I undertake to ensure that the student complies with the Institute's policies, procedures, rules and regulations and agree to act as guarantor for any fees incurred by the student and/or any monies or debts owed by the student to the Institute until the student reaches 18 years of age.

4. I consent to the Institute collecting, using, storing and disclosing my personal information in accordance with the Institute's General Privacy Collection Statement (www.chisholm.edu.au/privacy/general-privacy-collection-statement) and Privacy Policy (www.chisholm.edu.au/privacy) for the purposes of the Institute facilitating, administering and managing the student's access to and participation in the Institute's services.

Parent or Legal Guardian Details:

Name _____

Contact Number _____

Email _____

Signature ☐ **Date** _____

Document Control

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