



Victoria State Emergency Service Junior Member Parent / Guardian Consent Form

Parent / Guardian Clause (parent / guardian to complete)

I give consent for my (please select relevant term - referred to as "child" throughout the remainder of this document)

(child's given names)

(child's surname)

of

(usual residential address)

(telephone)

(date of birth)

(gender)

To participate in supervised induction, training and operations with the Unit

(select unit)

in the VICSES Region

(select region)

VICSES Junior Member Activities

VICSES Junior Members are eligible to participate in supervised training and operational activities within their Unit. Junior Members will be supervised at all times during training or operations. Each supervisor is a consenting, trained and experienced VICSES member, with three years' experience, who holds a current Working With Children check.

Activities VICSES Junior Members are eligible to participate in include:

- Theory and practical training
- Operational activities where they have been trained and assessed as competent
- Community Education events such as displays, talks, or driver reviver sites
- Administrative duties
- Equipment and vehicle maintenance
- Unit housekeeping

Emergency First Aid (parent / guardian to complete)

A First Aid provider will be available during all VICSES Operations and Training. Yes

In the event that your child needs emergency first aid, and it is not practicable to contact you beforehand, do you consent to emergency first aid being provided? No

Photography and Video Recording (parent / guardian to complete)

At VICSES events or related activities, your child may be photographed and/or video recorded by a volunteer, member of staff, or an endorsed representative of VICSES. Yes

Any images or likeness captured are owned by VICSES and may be used for promotional or other purposes without further consent being necessary. No

Do you consent to VICSES using your child's name, image and likeness, at any time, by any form of media, to promote VICSES?

Privacy Collection Notice

The information you provide on this form will be used for the purpose of processing your child's membership application and for purposes relating to their membership, including fulfilling our functions and responsibilities under the *Victoria State Emergency Service Act 2005 (Vic)* and communicating with you. If you do not provide the personal information requested, we will not be able to process their membership application. Your information may be disclosed to other emergency service organisations and government authorities in accordance with the need to fulfil our functions and responsibilities under the *Victoria State Emergency Service Act 2005 (Vic)* and to relevant authorities where required or authorised by law. You may access and seek correction of your personal information in accordance with the *Freedom of Information Act 1982 (Vic)*. Any queries about this Personal Information Collection Notice or our Privacy Policy should be directed to the Manager Information Security & Governance, Victoria State Emergency Service Head Office, 168 Sturt Street, Southbank, Victoria 3006.

Confirmation (parent / guardian to complete)

I confirm that the information given in this form is true, complete and accurate.

Signature

Date

Name

Witness (Unit Controller to complete)

Witnessed on behalf of the Victoria State Emergency Service

Signature

Date

Name