



SOUTH HALLS HEAD PRIMARY SCHOOL PARENTS AND CITIZENS ASSOCIATION INC.

Membership Form

Name: _____

Address: _____

Email: _____

Phone (Home): _____ Mobile: _____

- I have read and agree to follow the SHHPS P&C Code of Conduct (Available on the SHHPS Website)

Privacy Statement:

The South Halls Head Primary School Parents and Citizens Association (P&C) values its members and their privacy and will continue to protect the personal information which you entrust to us.

The P&C is required by WACSSO to collect the personal information of its members in order to maintain an annual membership register.

The P&C will not share your provided personal information with any third party. Your personal information may be shared with the endorsed Office Bearers and Online Administration for P&C related purposes only.

Signed: _____ Date: _____

Membership fee (\$1/yr) received by (Office Bearer): _____ / ____ / 20____

(Give this part to member)

Membership Receipt

Received from..... (Members name)

Amount paid (Membership fee)

Being Annual Membership fee for..... (Year)

South Halls Head Primary School P&C Assoc. Inc.

Signed.....

(P&C Secretary)

Date of issue of receipt..... / ____ / 20____