



# 2010 Trampoline Sports AUSTRALIAN CHAMPIONSHIPS

Friday 24 September – Friday 1 October  
ETSA Park MILE END  
ADELAIDE SOUTH AUSTRALIA

## 1. OFFICIALS

Team Manager:	Julie Bartlett
Sports Program Manager:	Nicholas Carroll
Head of Delegation:	John Hendry
Assistant Manager:	Sue Johnson
Chaperones:	Jennifer Martin and Jo Swadling
Head Coach:	Brett Austine
Trampoline Coaches:	Belinda Cox, Scott Finlayson
DMT Coach:	Michael Jennings, Louise Brown
Assistant Coach:	Ty Swadling, Damian Ryan & Christine Flew
Judges:	To Be Confirmed

## 2. EVENT & TRAINING SCHEDULE

Draft Training and Competition Schedules can be viewed in Gymnastics Australia's Bulletin 1 document. This is available to download from the Gymnastics NSW website (under the State Teams' tab).

## 3. PARENT CONTACT

Parents are encouraged to not attend the team accommodation, however parents can see their child at the conclusion of the session in which the child is competing.  
If you need to contact your child please contact **Team Manager Julie Bartlett 0422 468 803**

## 4. ACCOMMODATION / MEAL

**Del Monte - La Spiaggia**  
· 209 The Esplanade, Henley Beach, SA 5022, Australia ·  
Tel: +61 8 8355 1211, Fax: +61 8 8355 1311

All meals will be provided for the athletes. Any special dietary requirements should be indicated on the attached sheet.

**No parents, other than team members, are permitted to stay in the same accommodation as the Team.**

## 5. TEAM TRAINING

State team Training is compulsory. Athletes that do not attend state Team training with the prior consent of the SMC may jeopardize the athletes selection on the NSW state Team. Team Training will be held at the Central Coast Youth Club, on the 4th July, 8th August and 12th September (12<sup>th</sup> Sept. may be subject to change).

**Gymnastics NSW is subsidizing this tour by \$5,000**

## 6. UNIFORM

The 2010 State Team uniform is supplied by Coast 2 Coast Sports and GK Sportswear. This year, on top of the \$5000 contribution to the tour, Gymnastics NSW is supplying each team member with ONE free State team polo shirt from Coast 2 Coast.

All orders can be made online through the below websites. In order to receive the free polo shirt, each member will have a uniform code which is to be used when purchasing your Coast 2 Coast gear. If you do not have a code as yet, contact Nicholas on 02 8116 4111.

### GK Sportswear

The compulsory items are:

- ✓ Competition Leotard
- ✓ Training Leotard - \*Compulsory ONLY for females who choose to train in a leotard – there is a choice of ONLY the Training T-shirt plus Shorts (C2C) or the Official GK Training Leotard.

<http://www.gkelite.com/nsw.html>

### Coast 2 Coast Sportswear

The compulsory items are:

- ✓ Tracksuit Jacket
- ✓ Tracksuit Pants
- ✓ Training T-Shirt
- ✓ Polo Shirt (1 free)
- ✓ Shorts

The optional items are:

- ✓ Singlet
- ✓ Hoodie
- ✓ Carry Bag
- ✓ Back pack

<http://www.coast2coastsports.com.au/GNSWstateteam>

ITEM	ITEM PRICE
*Tracksuit Jacket	\$89.00
*Tracksuit Pants	\$56.00
*Training T-Shirt	\$29.00
*Polo Shirt – ONE provided free by Gymnastics NSW	\$44.00
*Shorts	\$33.00
Carry Bag	\$47.00
Backpack	\$44.00
Singlet	\$44.00
Hoodie	\$55.00
*Competition Leotard (Male)	\$86.90
*Competition Leotard (Female)	\$111.10
^Training Leotard (Female only)	\$83.60

All prices include GST.

\* Compulsory item

^ Compulsory for females who wish to train in a leotard

Note: Uniforms should have been tried on for sizing at State Championships. Anyone who has not done so should contact Lyn at Gymnastics NSW on 02 8116 4103.

## 7. TEAM ASSEMBLY

**DROP OFF – Junior and Senior international:**  
**Friday 24 September 2010**  
**At Hotel – Del Monte**

Junior and Senior Team members regardless of travel method need to arrive at the hotel on **Friday 24<sup>th</sup> September 2010 from 4.00pm onwards.**

**DROP OFF – Age Divisions:**  
**Monday 27<sup>th</sup> September 2010**  
**At Hotel – Del Monte**

'Age' Team members regardless of travel method **need** to arrive at the hotel **BEFORE 12:00pm (Noon), on the 27<sup>th</sup> September 2010.** NSW Age Training will begin at 2:30pm on the same day, so ALL athletes need to ensure they arrive on time.

**PICK UP - Junior and Senior international:**  
**From Competition Venue**  
**ETSA Park MILE END**  
**From 9.00am (The nominated pick up date and time must be clearly indicated on the 'Transport' form).**

**PICK UP – Age Divisions:**  
**Friday 1<sup>st</sup> October**  
**From Hotel**  
**Between 9.00am – 10.30am**  
**(any variation from this must be discussed with the Manager)**

## 8. FORMS & PAYMENTS

**All Forms & Payments will be collected as stated on the form.**

### **Forms Checklist**

✓	FORMS	DUE DATE	WHO
	Uniforms	Ordered online	
	Invoice	A final invoice will be circulated to clubs once costs are confirmed.	
	Medical	19th July, 2010	ALL TEAM MEMBERS
	Team Indemnity	19th July, 2010	ALL TEAM MEMBERS
	Working With Children	19th July, 2010	All team members 18 and over.
	Transport	28th August, 2010	ALL TEAM MEMBERS
	Team Member Invoice	TBA	ALL ATHLETES
	Muscular Skeletal	17th September, 2010	ALL ATHLETES

**All Forms** are to be sent to the GNSW Office, care of Nicholas Carroll (Trampoline SPM):

Fax: (02) 8116 4112

Email: [ncarroll@gymnsw.org.au](mailto:ncarroll@gymnsw.org.au)

Mail: PO Box 190, North Strathfield, NSW 2137

## **POLICIES**

The following Gymnastics NSW Policies are available on our website [www.gymnsw.org.au](http://www.gymnsw.org.au) and must be read by the Gymnast, Parents, Officials & Coaches:

- Gymnast Code of Conduct
- Parents Code of Conduct
- Officials Code of Conduct
- Coaches Code of Conduct
- Judges Code of Conduct
- Drug & Alcohol Policy

Disciplinary procedures are in place within Gymnastics NSW and will be adhered to should a gymnast, parent, official, judge or coach not adhere to the respective code of conduct. Should you wish to find out more about the disciplinary procedures, please contact the Sports Program Manager on 02 8116 4111.

## **ASDMAC FORM – Use of Prohibited Substance Notification Form**

To ensure that your child is not taking a banned substance please visit <https://checksubstances.asada.gov.au/> Athletes taking any of the banned medications must submit an 'Application for Therapeutic Use Exemption' Form directly to ASDMAC at PO Box 1744 Fyshwick ACT/ Fax 02 6222 4262, as well as a copy to GNSW.

## **MEDICAL & MUSCULOSKELETAL PROFILE**

A reminder that this form must be filled out by your physiotherapist and forwarded to Gymnastics NSW no later than **Friday 17 September 2010**. Forms can be faxed to (02) 8116 4112, emailed to [ncarroll@gymnsw.org.au](mailto:ncarroll@gymnsw.org.au) or posted to PO Box 190 NORTH STRATHFIELD NSW 2137.

## **9. GENERAL RULES**

### **MOBILE PHONES:**

Mobile phones (for athletes) are not permitted. Athletes who choose to bring their mobiles, will have them collected by the team manager upon arrival. Mobiles can only be accessed after seeking permission from Team Management. If parents need to contact their child due to special circumstances, they should contact Julie Bartlett (Team Manager) on 0422 468 803

### **VALUABLES:**

Gymnasts should **not** bring valuables or large sums of money with them into camp. Money can be given to the Team Manager however the Team Manager and Gymnastics NSW accept no liability. Valuables left with the Team Manager are done so at your own risk.

### **MEDICATION:**

- All medication must be handed to the Team Manager at check in – clearly labeled with Name, Type of Medication and Dosage. This includes Panadol or any paracetamol products, any cough elixirs, cold and flu medications, asthma medications etc.
- Please ensure you read the Drugs in Sport information with this pack to ensure all medication is notified to the appropriate authorities and you are aware of certain products that may be illegal.

## **10. SPECTATOR ENTRY FEES**

The spectator entry fees are not known at the time of producing this circular. Please consult the Gymnastics Australia website for further details [www.gymnastics.org.au](http://www.gymnastics.org.au)

## 11. WHAT TO PACK

- All competition and training leotards
- All competition gear
- Items for Hair (No glitter is permitted in the gymnasts hair at any time)
  - Pins and ties
  - Hair or Bun Nets
  - Brush, Comb, Hairspray etc
- Socks – White
- Pyjamas
- Underwear – competition and general
- All NSW apparel – Tracksuit, Polo shirt, NSW Training Shirt, Shorts, etc
- Spare Tracksuit pants or other pants close to NSW colors
- Spare T-shirts/Long sleeved shirts in NSW colors
- Toiletries – please ensure you include sanitary napkins
- Some casual clothes

If you have any additional questions please do not hesitate to contact Gymnastics NSW via email at [ncarroll@gymnsw.org.au](mailto:ncarroll@gymnsw.org.au) or by telephone on (02) 8116 4111.

## 12. ATTACHMENTS

- Musculoskeletal profile – Due 17 September
  - Team Transportation Form – Due 28th August
  - Invoice – For parents to keep
  - Invoice – A later edition of the Invoice will be made available once costs are confirmed, which will be circulated accordingly, with the relevant due date.
  - State Team Medical Profile and Consent – Due Monday 19 July
  - Indemnity and Acceptance of Position – Due Monday 19 July
  - Working with Children Check – Adults only - Due Monday 19 July
- ⇒ Draft Competition Schedules can be viewed on the GA Bulletin, which can be downloaded from the Gymnastics NSW website.

# TRP STATE TEAM - MUSCULOSKELETAL PROFILE

**\* Due Friday 17 September \***

To ensure all athletes are medically fit to compete in the Australian Championships it is a requirement that they undergo a musculoskeletal screening prior to the Australian Championships. The screening must be completed by either a physiotherapist or sports doctor as close as possible to Friday 17 September which is also the date the form must be submitted to Gymnastics NSW.

Dear Physiotherapist,

Thank you for completing this quick screen for this Trampoline Sports Gymnast. It should not take more than 20 minutes to complete. It is expected that a fee be charged to the gymnast for this screening.

Name of Gymnast: \_\_\_\_\_

Major Injuries in past 12 months: \_\_\_\_\_

\_\_\_\_\_

Current Injuries Reported: \_\_\_\_\_

\_\_\_\_\_

QUICK SCREEN (Comment on range, pain, etc)

	Left	Right		Left	Right
<b>Shoulders</b> Impingement AP Laxity Sulcas			<b>Hips</b> Quadrant Femoral Stress Test		
<b>Elbows</b> Ligaments Ext OP			<b>Knees</b> MCL / LCL ACL / PCL Menisci Pat Tendon		
Wrists Watson's Test Ext OP			Ankles Ant Imp Post Imp Achilles Ant Draw Navicular		
Cx Spine Rotation Extension Quadrant			Other Significant Findings		
Lx Spine Ext Quadrant Slump					

In your opinion is this gymnast fit to compete?                      YES                      NO                      (Please circle)

Name of Physiotherapist: \_\_\_\_\_ Signature: \_\_\_\_\_

**Please return the form to:**  
PO Box 190 NORTH STRATHFIELD 2137  
[ncarroll@gymnsw.org.au](mailto:ncarroll@gymnsw.org.au) or by fax (02) 8116 4112

**TRP STATE TEAM - TRANSPORTATION FORM**  
**\*Due Friday 27 August\***

Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Emergency contact person: \_\_\_\_\_ Mobile: \_\_\_\_\_  
Mode of transportation: \_\_\_\_\_  
Flight No. (If applicable): \_\_\_\_\_ Flight Arrival Time: \_\_\_\_\_  
Accommodation arrival Time (After 4pm): \_\_\_\_\_

**DROP OFF – Junior and Senior international:**  
**Friday 24 September 2010**  
**At Hotel – Del Monte**

Junior and Senior Team members regardless of travel method need to arrive at the hotel on **Friday 25<sup>th</sup> September 2010** from 4.00pm onwards. All Team members including Coaches must be wearing their NSW tracksuit.

**DROP OFF – Age Divisions:**  
**Sunday 27<sup>th</sup> September 2010**  
**At Hotel – Del Monte**

“Age’ Team members regardless of travel method **need** to arrive at the hotel **BEFORE 12:00pm (Noon), on the 27<sup>th</sup> September 2010**. NSW Age Training will begin at 2:30pm on the same day, so ALL athletes need to ensure they arrive on time. All Team members including Coaches must be wearing their NSW tracksuit.

**PICK UP - Junior and Senior international:**  
**From Competition Venue**  
**ETSA Park MILE END**  
**From 9.00am**

**PICK UP – Age Divisions:**  
**Friday 1<sup>st</sup> October**  
**From Hotel**  
**Between 9.00am – 10.30am**  
**(any variation from this must be discussed with the Manager)**

Departure Destination: (Tick one option)

- Competition venue – Date & Time: \_\_\_\_\_ @ \_\_\_\_\_ am / pm  
 Accommodation – Date & Time: \_\_\_\_\_ @ \_\_\_\_\_ am / pm

Will you be traveling accompanied by an adult? (Y/N) If Yes, whom: \_\_\_\_\_



# INVOICE - ABN 42 404 151 760 TRAMPOLINE SPORTS AUSTRALIAN CHAMPIONSHIPS

24 SEPT – 1 OCT, 2010

Please complete and submit with full payment (Cheque or Credit Card)

**DUE DATE: TBA**

Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

P/Code \_\_\_\_\_ PHONE: \_\_\_\_\_ LEVEL: \_\_\_\_\_

CLUB: \_\_\_\_\_ EMAIL: \_\_\_\_\_

<i>ITEM</i>	<i>PRICE</i>	
Uniform – Coast 2 Coast	Gymnastics NSW has introduced a new uniform this year. Orders can be placed online through the C2C website (see Section 6: Uniforms)	
Uniform – GK Sportswear	The Competition and Podium Leotards are as per the 2009 version and can be purchased online through GK (see Section 6: Uniforms)	
Entry Fee for ONE division ONLY (Elite <u>OR</u> Age Entry)	\$108.00	Select only ONE Entry Fee for each competing athlete ONLY.
Entry Fee for TWO Divisions (Junior Elite <u>AND</u> Age)	\$142.00	
Event T shirt *Compulsory for each athlete entry by GA	\$22.00	Please circle size Child: 8 / 10 / 12 / 14 XS / S / M / L / XL
GA Farewell Function	Gymnastics Australia to advise	
Team Traveling Costs (Elite Tour)	Clubs will be notified of the final traveling costs once the touring party and bookings are confirmed. Clubs will be notified of the cost and state team members will be invoiced. As a guide the team costs will be approximately \$100 per day.	
Team Traveling Costs (Age Tour)		
<b>TOTAL</b>		

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent to sign if gymnast under 18 years)

I will be paying by:  Cheque /  Visa /  MasterCard /  Bank Card

Amount Being Paid: \$

CARD DETAIL: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Expiry Date: \_\_ / \_\_

Name on Credit Card: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Receipt No: _____
Date: _____
Paid: _____



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24 SEPT – 1 OCT, 2010

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**DUE DATE: TBA**

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ADDRESS: \_\_\_\_\_

P/Code \_\_\_\_\_ PHONE: \_\_\_\_\_ LEVEL: \_\_\_\_\_

CLUB: \_\_\_\_\_ EMAIL: \_\_\_\_\_

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Team Traveling Costs	Clubs will be notified of the final traveling costs once the touring party and bookings are confirmed. Clubs will be notified of the cost and state team members will be invoiced. As a guide the team costs will be approximately \$100 per day.	
<b>TOTAL</b>		

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Parent to sign if gymnast under 18 years)

I will be paying by:  Cheque /  Visa /  MasterCard /  Bank Card

Amount Being Paid: \$

CARD DETAIL: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Expiry Date: \_\_ / \_\_

Name on Credit Card: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Receipt No: _____
Date: _____
Paid: _____



# TRP STATE TEAM - MEDICAL PROFILE AND CONSENT

***\*Due 19 July 2010\****

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ P/Code: \_\_\_\_\_

Next of Kin: \_\_\_\_\_ Emergency Contact Person: \_\_\_\_\_

Emergency Person Contact Details: \_\_\_\_\_

Known Medical Conditions (ie Asthma) Include Allergies: \_\_\_\_\_

\_\_\_\_\_

Special dietary requirements: \_\_\_\_\_

\_\_\_\_\_

Current Medications: \_\_\_\_\_

\_\_\_\_\_

Private Health Fund Name: \_\_\_\_\_ Number: \_\_\_\_\_

Current Physiotherapist: \_\_\_\_\_ Ph: \_\_\_\_\_

Current Doctor: \_\_\_\_\_ Ph: \_\_\_\_\_

Other Health Provider: \_\_\_\_\_ Ph: \_\_\_\_\_

MEDICARE No: \_\_\_\_\_

Patient Number on Card: \_\_\_\_\_

I (parent if under 18) \_\_\_\_\_ hereby give permission for the Team Manager, or designated representative to seek medical aid in the event of an accident, injury or illness to the above team member.

2. General medical aid, including transport, will be at the discretion of the Manager, or designated representative.

In addition:

Specific permission, on appropriate medical advice, is given for the following:

\* Traumatic injury requiring surgery YES / NO

\* General Anaesthesia YES / NO

\* Blood Transfusion YES / NO

Have you been vaccinated for Hepatitis B YES / NO

Blood Type (if known) \_\_\_\_\_

Signature: \_\_\_\_\_ Team member

\_\_\_\_\_ Parent / Guardian

(if team member is under 18 years old)

Note: Parents will be contacted, if possible, prior to any medical attention being given.

**TRP STATE TEAM –  
TEAM INDEMNITY & ACCEPTANCE OF POSITION FORM**

***\*Due: 19th July 2010\****



I, \_\_\_\_\_ (name)

of \_\_\_\_\_ (address)

phone number: \_\_\_\_\_ (work); \_\_\_\_\_ (home)

a member of \_\_\_\_\_ (club)

hereby to agree to become a member of the New South Wales Trampoline Sports Gymnastic Team to the

***2010 AUSTRALIAN CHAMPIONSHIPS***

under the following conditions:

I undertake:

1. To travel to and depart from the place of assembly of the team upon the dates and means of conveyance decided by Gymnastics NSW.
2. To at all times during the tour act in accordance with the 'Gymnast Code of Behaviour'.
3. To remain under the control, management and direction of the Manager or person appointed by him/her from the date of assembly until my return to NSW or official release from the team and to comply with all orders and instructions given by him/her or person appointed by him/her during that period.
4. To conduct myself in a proper manner and to exercise by best endeavors to render myself fit for competition and training during the tour and to return to NSW forthwith if ordered to do so by the Manager. I understand that my additional costs will be at my personal expense.
5. I will refrain from all alcoholic drinks during the duration of the tour.
6. To disclose forthwith to the Manager any injury that might prejudice participation in the tour.
7. On occasions prescribed by the Manager, to wear the official uniform.
8. To comply with all Gymnastics NSW policies and procedures including, but not limited to, the 'Member Protection Policy' and its codes of conduct, and the 'Drug and Alcohol Management Policy'.

I acknowledge that in the event of any breach of discipline or misbehavior on my part, I am liable to the following penalties:

1. To be sent home forthwith with no refund of expenses.
2. To be excluded from competition or other activities as the Manager may see fit.

I understand that a Management Fee of 20% of my total costs will be forfeited if I am unwilling to tour without a valid reason accepted by Gymnastics NSW.

I, the undersigned, hereby agree that the New South Wales Gymnastic Association or any member thereof and/or any person and/or anybody or association associated in any way with the conduct or participation in this event (all of which persons, bodies or associations are severally and jointly included in the term "the indemnified" shall not be deemed responsible or liable in any way for any injury, illness or other mishap to me/us of my child (if under 18 years of age) sustained in, arising from or out of, or in any way directly or indirectly connected with any traveling, training, or function of whatever nature held during the period of the tour or prior or subsequent thereto if in any way connected directly or indirectly with the said tour and hereby indemnify the indemnified against any action, suits, courses of action, demand and claims by me/us or any other person or persons whatever made in connection with or arising out of such injuries, illness or mishap to me/us or my child and hereby agree (without in any way imposing or attaching any liability or obligation upon the indemnified to do so), that the indemnified may act as our agents in incurring such expenses as, and/or connected with or arising out of any such illness or mishap.

**TRP STATE TEAM –  
TEAM INDEMNITY & ACCEPTANCE OF POSITION FORM -  
CONTINUED**  
***\*Due 19th July 2010\****



**Gymnast Code of Behaviour**

All athletes must meet the following requirements in regard to conduct during any activity held or sanctioned by Gymnastics NSW a member association or an affiliated club and in your role as a participant in any activity held by or under the auspices of Gymnastics NSW, a member association or an affiliated club:

1. Respect the rights, dignity and worth of fellow gymnasts, coaches, officials and spectators.
2. Do not tolerate acts of aggression.
3. Respect the talent, potential and development of fellow gymnasts and competitors.
4. Care for and respect the equipment provided to you as part of your program.
5. Be frank and honest with your coach concerning illness and injury and your ability to train fully within the program requirements.
6. At all times avoid intimate relationships with your coach.
7. Conduct yourself in a professional manner relating to language, temper and punctuality.
8. Maintain high personal behaviour standards at all times.
9. Abide by the rules and respect the decision of the official, making all appeals through the formal process and respecting the final decision.
10. Be honest in your attitude and preparation to training. Work equally hard for yourself and your team.
11. Cooperate with coaches and staff in development of programs to adequately prepare you for competition at the highest level.

I confirm that I have read and understand the 'Team Indemnity and Acceptance of Position Form' and 'Gymnast Code of Behaviour' and I confirm that I accept membership of the team on these express conditions.

Signature \_\_\_\_\_ (Team Member)

Position in team \_\_\_\_\_

Dated at: \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 2010

In the presence of \_\_\_\_\_ (Witness)

## WORKING WITH CHILDREN CHECK PROHIBITED EMPLOYMENT DECLARATION

*To be completed by employees, volunteers and other team members over 18 years of age*

***\*Due 19 July 2010\****

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### **CHILD PROTECTION (PROHIBITED EMPLOYMENT) ACT 1998**

The *Child Protection (Prohibited Employment) Act 1998* makes it an offence for a person convicted of a serious sex offence (a Prohibited Person) or a Registrable Person under the *Child Protection (Offenders Registration) Act 2000*, to apply for, undertake or remain in, child-related employment. It does not apply if an order, from the Industrial Relations Commission or the Administrative Decisions Tribunal or the Commission for Children and Young People, declares that the Act does not apply to a person in respect of a specific offence. Section 5 of the *Child Protection (Prohibited Employment) Act 1998* defines a serious sex offence as:

- an offence involving sexual activity or acts of indecency that was committed in NSW and that was punishable by penal servitude or imprisonment for 12 months or more, even if the sentence was not served; or
- an offence involving sexual activity or acts of indecency that was committed elsewhere and that would have been punishable by penal servitude or imprisonment for 12 months or more if it had been committed in NSW; or
- an offence under Sections 91D-91G (other than if committed by a child prostitute) and 578B or 578C(2A) of the *Crimes Act 1900* or a similar offence under a law other than a law of NSW; or
- an offence of attempting, or of conspiracy or incitement, to commit an offence referred to in the preceding paragraphs; or
- any other offence prescribed by the regulations.

*Note: A conviction for carnal knowledge is classified as a serious sex offence under this legislation.*

**Child-related employment** means any employment, where at least one of the essential duties of the position, involves direct contact with children where that contact is not directly supervised. Section 3 of the *Child Protection (Prohibited Employment) Act 1998* specifies that child-related employment is employment:

- involving the provision of child protection services;
- in pre-schools, kindergartens and child care centres (including residential child care centres);
- in schools or other educational institutions (not including universities);
- in detention centres (within the meaning of the *Children (Detention Centres) Act 1987*);
- in refuges used by children;
- in wards of public or private hospitals in which children are patients;
- in clubs, associations or movements (including of a cultural, recreational or sporting nature) having a significant child membership;
- in any religious organisation;
- in any entertainment venues where the clientele is primarily children;
- as a babysitter or childminder that is arranged by a commercial agency;
- involving fostering or other child care;
- involving regular provision of taxi services for the transport of children with a disability;
- involving the private tuition of children;
- involving the direct provision of health services;
- involving the provision of counselling or other support services for children;
- on school buses;
- at overnight camps for children;
- any other prescribed by regulation.

**Cont.**

**Under this Act:**

- it is an offence for a Prohibited Person to **apply for, undertake or remain in** child-related employment;
- employers **must** ask existing employees, both **paid and unpaid**, and preferred applicants for employment to declare if they are a Prohibited Person or not;
- all child-related employees **must** inform their employers if they are a Prohibited Person or remove themselves from child-related employment. A Prohibited Person is someone who has been convicted of a serious sexual offence or, who has had a finding for a charge of a serious sexual offence proven in court, even if a conviction was not recorded;
- penalties are imposed for non compliance.

**I am aware that I am ineligible to apply for, undertake or remain in, child-related employment if I have been convicted of a serious sex offence as defined in the *Child Protection (Prohibited Employment) Act 1998* or if I am a Registrable Person under the *Child Protection (Offenders Registration) Act 2000*.**

**I have read and understood the above information in relation to the *Child Protection (Prohibited Employment) Act 1998*. I am aware that it is an offence to make a false statement on this form.**

**I declare that I am not a person prohibited by the Act from seeking, undertaking or remaining in child-related employment.**

I understand that this information may be referred to the Commission for Children and Young People and/or to NSW Police for law enforcement purposes and for monitoring and auditing compliance with the procedures and standards for employment screening in accordance with Section 36 (1) (f) of the *Commission for Children and Young People Act 1998*.

Name : \_\_\_\_\_

Signature: \_\_\_\_\_

Date : \_\_\_\_\_ Contact telephone number: \_\_\_\_\_

***Note: Seek legal advice if you are unsure of your status as a Prohibited Person.***