Ballajura Community College Police Rangers
Enrolment Form 2022
(Information used for enrolment and statistical purposes by The College and CADETSWA)

Ranger's Full Name:	Surname:		First Name:	
Address:	**Number and Street:**		**Suburb:**	
Parent/ Guardian:	**Full Name:**		**Relationship to Ranger:**	
	Home Phone:	**Work Phone:**	**Mobile:**	

Ranger Details:

Date of Birth:

Age at June 30 2022:

12	13	14	15	16	17	18

Male ☐ **or Female** ☐

Year 1ˢᵗ Commenced Rangers

2022	2021	2020	2019	2018	2017

2022 Home Room: ☐

Rank: (*Recruit* for new rangers)

Personal Mobile: **Best email contact:**

Ethnicity	**Are you an Aboriginal or Torres Strait Islander? Yes** ☐ **No** ☐	**Were You Born in a non-English Speaking country?** **Yes** ☐ **No** ☐
Disability	**Do you have a diagnosed disability?** **Yes** ☐ **No** ☐ **Disability:**	
Medical details that may impact on training	Please attach any specific medical plans or indicate if there are documented plans held by the College:	
Photo permission	Photos taken by the unit may be used for promotional purposes only. Do you give permission for photos to be shared? **Yes** ☐ **No** ☐	

Parent/ Guardian:

I have read the information page and agree to support the management team in the maintenance of these standards (uniform, attendance etc.) I have disclosed relevant information for enrolment purposes and give permission for my child to enroll in the Ballajura Community College Police Rangers Unit.

Parent Name:	Parent Signature:	Date:

Applicant:

I have read the information overleaf and undertake to attend the training sessions regularly, take good care of uniform and equipment and return all property should I leave the unit. I agree to conduct myself at all times in such a manner as to reflect credit upon myself, The Unit and The College.

Student Name:	Student Signature:	Date: