



# WEST END STATE SCHOOL PARENTS & CITIZENS' ASSOCIATION

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## Custody Advice Form

Name of Enrolling Parent/Guardian: \_\_\_\_\_

Name of Child: \_\_\_\_\_

Do you have a legally enforceable Family Law Court Custody Order, Protective Order or similar judgement currently in force? **YES / NO**

Effective Date of Judgement: \_\_\_\_\_

Type of Order/Judgement: \_\_\_\_\_

**Please note: You must provide us with copies of all documents to enable us to comply with any such orders.**

Please give clear, specific details of order: *(If insufficient room, continue over page or you may attach a separate page provided it is signed and dated by you).*

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Do you and/or your child have a Personal Safety Plan that we need to be aware of? **YES / NO**

Please give clear specific details of plan: *(If insufficient room, continue over page or attach a separate page provided it is signed and dated by you).*

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To help us to identify them, please provide a physical description of any persons named in the relevant Court Order.

Please be specific, include any distinctive characteristics or features:

*(Please provide photo below if available)*

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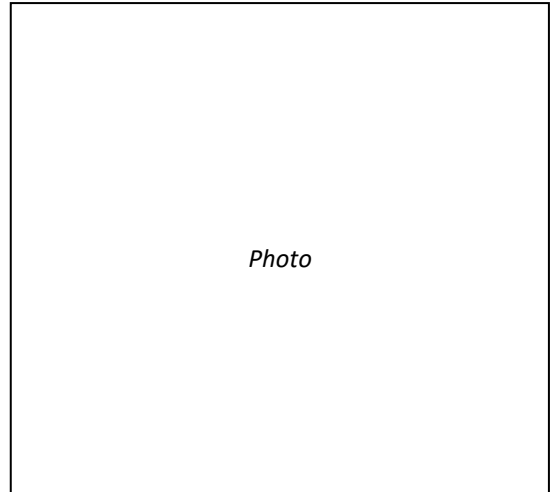
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I declare that the information I have provided on this form is true and correct at the time of signing. I understand that if any of the above information changes, it is my responsibility to provide the relevant information to the Service and hereby agree to do so immediately upon any change in my circumstances.

**Parents/Guardian's Name & Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Coordinator's Name & Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_