

CONFIDENTIAL DECLARATION

To be forwarded to:
Casualties Union Headquarters
PO Box 1942, London E17 6YU



I hereby declare and represent that, save as disclosed below, I have not at any time either within the United Kingdom or abroad been found guilty by a Court of any offence concerning children or young people under the age of majority, nor bound over, placed on probation or discharged either conditionally or absolutely in relation to such offences.

I understand that, because my voluntary work with CASUALTIES UNION will involve contact with persons under the age of 18 years, any convictions involving minors which are 'spent' under the terms of the Rehabilitation of Offenders Act 1974 must be disclosed. I also understand that failure to disclose in full the matters required to be disclosed by this declaration will result in immediate suspension of my membership with the likelihood of its termination.

I hereby consent to any reference being taken up by CASUALTIES UNION, for the purposes of verifying the replies given in the declaration, including enquiries of the Police or of any other relevant authority. I understand that no application for duties involving young people will be considered if I withhold my consent.

Details of my previous convictions, cautions or bind-over orders are as follows:

<u>Date</u>	<u>Offence</u>	<u>Penalty</u>
-------------	----------------	----------------

Print full name

Signed **Date**

Parent/Guardian (If applicant is under 18 years of age)

Print full name

Signed **Date**

All details on this form will be treated as confidential.