

Record of Visitors

Educator Name: _____

Educator Address: _____



DATE	VISITOR'S NAME	ADDRESS & PHONE NUMBER	LICENCE # / BLUE CARD #	REASON FOR VISIT	TIME IN / TIME OUT	SIGNATURE

Note: All visitors must complete this register/log in full. Licence number MUST be provided for any visitors who do not hold a current Blue Card, as required under the Working with Children (Risk Management and Screening) Act 2000 (QLD), and in line with the service's policies and procedures. For more information, visit: www.qld.gov.au/bluecard