



Weston Creek Men's Shed Inc.

Application for Membership

The information is private and in confidence provided for reasons of insurance and Occupational Health and Safety within the Weston Creek Men's Shed (WCMS) and at Committee endorsed events.

This information will **not** be distributed or used outside WCMS.

Applicant's Details

Family Name:	
Given Name:	Preferred Name:
Date of Birth: Day/Month/Year (optional):	

Applicant's Contact Details

Address:		
	State:	Postcode:
Phone:	Mobile:	
Email Address:		

Alternate/Emergency Contact Person

Name:	Relationship:
Phone:	Mobile:
Suburb:	State:

Men's Shed Health & Safety are paramount

Occupational Health and Safety

Do you have health or medical conditions that we need to know about?	YES	NO
Details:		
Are you on any medication that may affect your capacity to operate tools or machinery?	YES	NO
Details:		
Do you require assistance with any activity?	YES	NO
Details:		
Do you live alone? (optional)	YES	NO

Occupation current or pre-retirement:
Skills:
Interests:
Other information you feel is relevant:

Annual Membership fee \$40.00 (six months \$20:00)

A fee of \$5:00 is payable once a week when you attend the shed to cover incidental expenses.

Should I be accepted as a Member of Weston Creek Men’s Shed Inc. I agree to be bound by the Rules of WCMS.

(Applicant signature)	(Date)
(Sponsoring member signature)	(Date)

Administration

Treasurers signature:	Receipt number:
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