



Application for Membership Renewal

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:

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

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

I agree to be bound by the Rules of WCMS.

Signature	Date
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Administration Use Only

Treasurer's signature:	Receipt number:
Secretary's signature:	Date added to membership list:

