



Weston Creek Men's Shed Incorporated

ACT A05526
ABN 50 499 680 621
37 Bangalay Crescent, Rivett ACT 2611



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

The next four questions are optional. However, you are required to submit this information in the confidential ICE envelope on your health and medical status. This information is only made available to health professionals if you are involved in an emergency.

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?	YES	NO

Skills and Interests (Optional)

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

Annual Membership fee \$50.00 (six months \$25:00)

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 Use Only

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

The following Induction Form is to be completed and signed by a Shed Representative and the Member/Applicant

		Tick
<i>Emergency Procedures</i>	Indicate EXITS and explain evacuation procedures	
	Indicate evacuation assembly point	
	Indicate location of emergency contact notice	
	Indicate location of First Aid Kits & Defibrillator	
	Indicate location of Fire Extinguishers	
<i>Amenities</i>	Indicate Toilets and Kitchen	
	Explain Tea / Coffee facilities and use	
	Indicate location of clean up equipment	
<i>Safety</i>	Indicate location of PPE Appropriate PPE must be worn when required	
	Suitable closed footwear must be worn at all times in Workshops	
	Assessment by Workshop Manager or delegate required before machinery can be used on premises	
	Safety or any other concerns should be referred to Duty Officer	
	Carers are responsible for clients at all times	
	Security cameras/alarms are installed for security and safety purposes at the shed.	
<i>General Information</i>	Workshop opening hours 9:00am – 12:30pm Mon,Tue, Thur and Fri	
	Community opening hours 9:00am - 1:00pm Mon, Tues, Thur and Fri Social events held on Thursday 12:00 - 3:00	
	Annual Membership Fee \$50 (financial year)	

<i>General Information (continued)</i>	A fee of \$5:00 is payable once a week when you attend the shed to cover incidental expenses.	
	Members need to be financial to use machinery and tools and to work in workshops	
	Rules and procedures are available online, hardcopy available on request	
	Newsletters and shed information available on website	
	No Smoking in facilities - smokers requested to use area outside the fence adjacent to Oval	
<i>Projects</i>	The Shed takes on community projects as required	
	Personal projects can be undertaken on shed premises using own or approved materials	
	Large projects must be approved by Workshop Manager	
	All projects must be registered with Workshop Manager	
	Projects and tools put away and area cleaned after each workshop session	

	Print Name	Signature	Date
<i>Applicant / Member</i>			
<i>Shed Representative</i>			