



CHANNEL MEN'S SHED INC. MEMBERSHIP APPLICATION

Application Form Guidance:

- Please complete ALL questions on pages 1 & 2. Some questions require written information from you, some a Yes/No response and some require a tick box confirmation that you agree to these membership requirements.
- Email addresses should be printed clearly.
- Check your mobile number contains all 10 numbers eg. 0421 123 456.
- The Applicant's Declaration (which outlines CMS & Member responsibilities) on Page 2 needs to be signed.
- Where possible, CMS COORD's are to include their name on the bottom of Page 2 when issuing application forms to a prospective new member.

Membership applications welcome from Men aged 18 years and over

Name:Date of Birth:

Address:
..... Postcode:

Telephone: Home: Mobile:

Email:

Emergency Contacts:

<u>Name</u>	<u>Relationship</u>	<u>Home Phone</u>	<u>Mobile Phone</u>
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Have you any health conditions or are you on any medication that may affect your capacity to operate machinery? **YES / NO** If yes, please provide brief details below.

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Occupation (Past or Present):

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Do you have qualifications in your area of expertise? **YES / NO** If yes, please list your qualifications below.

<u>Qualification</u>	<u>Expiry Date (if applicable)</u>
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What are your particular areas of interest in the Shed? (e.g., woodwork, metalwork, small engines, companionship, other.)

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I acknowledge and agree that membership to the Channel Men's Shed, including use of its facilities and equipment, does not become effective until payment of my membership subscription has been received by the Shed and I have completed a shed induction session.

I confirm that I am COVID 19 Vaccinated or have been granted a medical exemption.

Applicant's Declaration

In becoming a Member of the Channel Men's Shed Inc. (CMS), I understand and agree:

- CMS will make every effort to maintain a safe environment at the Shed for its members, visitors, contractors, agents and others lawfully utilising the Shed and its facilities (referred to as patrons);
- CMS and its representatives are not responsible and do not accept responsibility for:
 - a) the personal health, safety and well-being of patrons whilst in the Shed, utilising the facilities or participating in any activity of CMS;
 - b) the loss or damage of any member's personal items taken to or from the Shed or any other place at which CMS activities are being carried on; and
 - c) any personal injury including death of any patron whilst at the Shed or any other place at which CMS activities are being carried on or whilst utilising its facilities or participating in any activities of CMS;
- to release CMS and its representatives from any claim by me or my estate for the loss or damage to any personal item or injury I may suffer whilst at the Shed or utilising its facilities or participating in any activity of CMS;
- to abide by the policies and procedures of CMS, to act in a safe and respectful manner at all times whilst I am at the Shed or utilising its facilities or other activities of CMS and will have due care and regard for other patrons working around me whilst at the Shed or participating in any activity of CMS.

Applicant's Signature..... **Date:**

Proposer's Name: Date:

Proposer's Signature:

Secunder's Name: Date:

Secunder's Signature:

CMS COORD: