



# Wareham Area Men's Shed

## Membership Form

Complete the membership form to become a member of Wareham Area Men's Shed. Your form will not be accepted unless it is completed in full, including the disclaimers overleaf.

| Personal Information   |   |                                      |  |
|--|---|--------------------------------------|--|
| Name:  |   | Known as:                            |  |
| Address:   |   |                                      |  |
|  |   | Postcode:                            |  |
| D.O.B:   |   | Email:                               |  |
| Tel no:  |   | Mobile:                              |  |
| I want to be considered for a role in Shed's Development Group:  |   | Yes <input type="checkbox"/>         | No <input type="checkbox"/>                    |
| Do you have any of the following skills?   |   | Woodworking <input type="checkbox"/> | Metalworking <input type="checkbox"/>          |
|  |   | Electronics <input type="checkbox"/> | Furniture Restoration <input type="checkbox"/> |
| Other:   |   |                                      |  |
| What activities are you interested in doing in the Shed?   |   | Woodworking <input type="checkbox"/> | Metalworking <input type="checkbox"/>          |
|  |   | Electronics <input type="checkbox"/> | Furniture Restoration <input type="checkbox"/> |
| Other:   |   |                                      |  |
| Emergency Contacts   |   |                                      |  |
| Contact name:  |   | Contact number:                      |  |
| Relationship:  |   |                                      |  |
| Doctor's name:   |   | Doctor's number:                     |  |
| Please state any medical details which we should be aware of the case of emergency (e.g. diabetes, epilepsy, medication)   |   |                                      |  |
|  |   |                                      |  |
| Shed Membership Fee  |   |                                      |  |
| A suggested annual donation of £25 or more is encouraged on joining (pro-rata for part of year which runs from 1 <sup>st</sup> May) and each year thereafter to help with the upkeep of the Shed. You should pay what you can afford and no more. The fee can be waived in some cases. Please speak to the Chairperson of the Management Committee if you are concerned. In addition, each session you attend has a fee of £5. |   |                                      |  |
| Payment method for Annual Donation:  | Cash  |                                      | <input type="checkbox"/>                       |
|  | Cheque (payable to Wareham Area Men's Shed)   |                                      | <input type="checkbox"/>                       |
|  | BACS Payment (Account name: Wareham Area Men's Shed, Sort Code: 30 96 26 Account no: 35604360. Please give your full name as the reference with your payment) |                                      | <input type="checkbox"/>                       |
|  |   |                                      |  |
| Signature:   |   | Date:                                |  |

Please read and confirm your agreement to the statements on the rear of this form by ticking the relevant boxes. Please return your completed membership form to The Treasurer, Wareham Area Men's Shed, 1 Stowell Crescent, Wareham, Dorset BH20 4PT.



# Wareham Area Men's Shed

Thank you for your interest in Wareham Area Men's Shed.

## Declarations and Disclaimers

You must read in full and confirm your acceptance and agreement to each of the following statements by ticking the box.

### Safety

I understand that the activities of the Shed carry hazards and I will be doing them at my own risk. I understand that my safety is my own responsibility and confirm that I will comply with the Shed's Health and Safety policy. I will wear any personal protective equipment deemed necessary for any particular item of equipment and will comply with any and all safety instructions. I agree to ensure my full understanding of the instructions for use and safety on every piece of equipment I use, and I will act responsibly to ensure my own safety and that of others. I understand that Wareham Area Men's Shed excludes all liability to the full extent permitted by law and accept that not Wareham Area Men's Shed nor any of its Management Committee shall be liable for any direct or indirect loss, damage or injury arising from or in connection with my participation in the Shed's activities and I waive all and any claims in this respect.

I hereby consent that I have read, understood and agree to the above statement.  (tick)

### Health

I understand that I must disclose details about my health that might affect me in carrying out the activities in Wareham Area Men's Shed. I understand that Wareham Area Men's Shed is not responsible for giving medical assistance or organising carers or medical support beyond seeking help in an emergency or referring me to professional services if they deem me to be at risk. All medical information will be treated as confidential and held securely.

I hereby consent that I have read, understood and agree to the above statement.  (tick)

### Privacy

I consent to the collection and use of my personal information for the purposes of my membership of Wareham Area Men's Shed and in Wareham Area Men's Shed communicating information to me. Your personal information will never be distributed, sold or shared with third parties not stated above, except if required by law.

I hereby consent that I have read, understood and agree to the above statement.  (tick)

I understand that from time to time photographs and videos may be taken within the Shed. I consent to their use by Wareham Area Men's Shed and UK Men's Sheds Association in publications, newsletters and in the media to highlight the good work of Men's Sheds. I understand that this consent can be withdrawn at any time in writing.

I hereby consent that I have read, understood and agree to the above statement.  (tick)