

South Woodham Ferrers Men's Shed

19 Woodham Halt, South Woodham Ferrers, Chelmsford CM3 5JB

MEMBERSHIP FORM - PERSONAL DETAILS

MY DETAILS					
FULL NAME					
HOME ADDRESS					
POSTCODE					
Year of Birth					
HOME NUMBER					
MOBILE NUMBER					
EMAIL ADDRESS					
EMERGENCY CONTACT					
NAME					
CONTACT TELEPHONE No					
RELATIONSHIP TO YOU					
ANY MEDICAL OR LIFATTH ISSUES IN	CASE OF EN	AFRICANCY F.C. FRUERCY ACTURAL FTC			
ANY WEDICAL OR HEALTH ISSUES IN	CASE OF EIV	MERGENCY, E.G., EPILEPSY, ASTHMA, ETC			
	Yes	Expires Date:			
ARE YOU A TRAINED FIRST AIDER?	No	I would like to do a one-day course:			
	INO	I would like to do a offe-day course.			
ANY SKILLS OR EXPERIENCE THAT Y		DDING TO THE MEN'S CHED?			
ANY SKILLS OR EXPERIENCE THAT Y	OO COOLD B	DRING TO THE WIEN 3 SHED!			
WHAT ACTIVITIES/HOBBIES INTERE	ST YOU? E.g.	g., WOODWORK, METALWORK, CRAFTS, ETC			
Following a probationary period and acceptance, there is a £24 membership fee for the year					
to be part of the Men's Shed at South Woodham Ferrers to cover Insurance and Utility costs.					
 There will be a £3 charge for the session and tea/coffee. Other refreshments may be 					
available in the fridge (honesty box).					
Annual Payment received - D	ATE:				
The person receiving the money (Name & Sign)					

A donation will be made to the Shed for materials used to construct personal projects. SWF Men's Shed intends that I will:

- Undertake a probation period of 4 visits for assessment purposes within four weeks.
- The Committee will then decide on full membership, and you will be notified of the outcome and pay the membership fee. The Committee's decision is final.
- Respect other people and their possessions.
- I will take responsibility for my own safety and those around me.
- Only use tools and equipment that I am competent to use or use under supervision for training to be competent.
- Pay for any damage to tools and machinery through misuse.
- Comply with rules, regulations, and the spirit of the Men's Shed operation.
- Any failure to comply with rules and regulations after requests and guidance will relinquish my membership. The Committee's decision is final.
- Follow the Code of Conduct as it is presented. DISCLAIMER

"I participate in the SWF Men's Shed and understand that every effort will be made to maintain a safe environment for myself and other participants. I will wear appropriate Personal Protective Equipment (PPE) as deemed necessary when using tools and machinery and will adhere to all safety instructions.

The sponsoring operations, their representatives, and people appointed as Supervisors at the Men's Shed do not take responsibility for the personal health, safety, and well-being of the people participating in projects. We, the organisation mentioned above and individuals, take no responsibility for loss or damage of any personal items taken to or from the Shed and waive all and any claims in this respect of the above."

DATA PROTECTION ACT 2018 – Statement

The information you have provided on this form will be treated as confidential and will be held following the Data Protection Act 2018

DECLARATION

The details I have provided are correct, and I have read and understood the above statement.

APPLICAN	ITS SIGN	ATURE
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Signed: Date:

File: Membership Application Form SWFMS-v2023-12