

Men's Shed Membership Form

Registration Date:	
Name:	
Date of Birth:	
Address:	
Contact Details: Home Phone	Mobile
Email Address:	
Emergency Contact Person:	
Emergency Contact Phone Number(s):	
Emergency contact relationship to you?	
Any medical conditions we need to be aware of?	
What experience do you have in DIY, Men's Shed/Workshop?	
<p>DISCLAIMER: I participate in The Dural Community Men's Shed with the understanding that The Centre will make every effort to maintain a safe environment in the Shed for its members. The Centre and people appointed as supervisory trainers in the Shed do not take responsibility for the personal health, safety and well- being of people participating in the Dural Men's Shed. The above mentioned organisation and individuals take no responsibility for any loss or damage to any personal items taken to or from the shed.</p>	
Signature:	
Print Name	Date
Official use only - CRM entry date:	