



# Noosa Men's Shed

## Application for Provisional Membership

**Please note:** Upon completion of this application form and your payment of our annual fee, you become a **provisional member** of our Shed. Once accredited, you may use relevant Shed equipment and participate in Shed activities. However, you do not have the rights of a full member, such as voting at meetings, until your application is approved by the Executive Committee. On approval you will receive a **Membership Welcome email** and can undertake the Shed's induction program.

### Contact Information

Name: \_\_\_\_\_ Date of Birth: / /

Name for your 'Name Tag' \_\_\_\_\_

Street Address: \_\_\_\_\_ City and Post Code \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Availability Note:** *our current open hours are Mon – Fri 8am-noon. Some activity Sheds will not always be open – check with the coordinator of the Shed where you wish to work. Office is open Tuesday & Thurs mornings.*

### Specialised Skills or interests

Place a tick in the box in the areas of operation you may be able to assist the running of The Noosa Men's Shed

Administration (finance, accounting, legal etc )  Kitchen  Committee Member

**Noosa Men's Shed Inc. is a registered charity and is totally reliant on members volunteering to participate in fundraising initiatives to fund the facilities, equipment, and ongoing activities.**

**Please indicate any Medical State or Condition, Disability that The Noosa Men's Shed should be aware of:**

**Please note:** If your disability requires your need for continuous assistance or supervision, please discuss this with our Shed Committee. It might be necessary that your carer also join our shed and be present for 100% of your time at the shed.

### Person to notify in case of emergency

Name: \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Post Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile \_\_\_\_\_

**Our Confidentiality Policy :** Every effort will be made by Noosa Men's Shed to secure the personal information you have given in this application for membership. However, your contact information will be required to keep you informed of all Shed activities. Your information will be held by Noosa Men's Shed until your membership has ceased when it will then be destroyed.

### Agreement and Signature

By submitting this application, I confirm that the facts set forth in it are true and complete

Name- Please Print: \_\_\_\_\_

Signature \_\_\_\_\_ Date: / /

### Payment of Annual Subscription options - Annual Membership Fee \*\*

\*\* Contact Noosa Men's Shed for details of fees before paying. You can pay either by:

- (a) Cash or Eftpos at the office
- (b) Crediting our bank account via Internet Banking to

Account Name: **Noosa Men's Shed Inc**

BSB: 633000 Account No: 152427001 Remitter or Reference: Your name

Membership Paid – Receipt No.
Annual Attendance Fee Paid
Membership Confirmed by Committee
Membership Database Updated
Contact Details Entered on Gmail
Name Badge Printed
Induction Completed
Welcome email & Certificate sent