

SHEDQUARTERS, OXON

Registered Charity No 1198347

Member of the UK Men's Shed Association

Website: www.shedquarters.org.uk

Shedquarters postal address:

c/o Arnewood, 9 Birch Close,

Sonning Common, Reading RG4 9LE

Email: info@shedquarters.org.uk**MEMBERSHIP FORM**

Please complete the membership form to become a member of Shedquarters, Peppard Memorial Hall, RG9 5JA

Personal Information:

Name:		Known as:	
Address:			
		Postcode:	
Email address:		Date of Birth:	
Mobile number:			

Your skills and knowledge:

What are you interested in learning at Shedquarters? Please give as much detail as possible

--

Do you have any skills you could share with other members? If so, please tell us...

--

In Case if Emergency contact details (ICE):

Name of Person to contact in an emergency:			
Your relationship with them:		Their Telephone Contact:	

Do you have any conditions that may cause problems using machinery or access issues that the management team need to be aware of? [Either state here or discuss confidentially with an Officer of Shedquarters]

If yes, please describe:

--

**** Your name badge will include details of your ICE contact ****

Other personal information will be stored securely and may be used in an emergency

Please turn over

Shedquarters Membership Fees:

Please come along for two free trial sessions. Membership fees will then be charged at £25 per quarter or £90 per annum or by other arrangements discussed with a Committee Member or Day Leader.

Payment Method: By BACS transfer, standing order or cheque. Please post to address on top right of previous page.

Account details: Shedquarters. Nat West Bank. Sort Code: 60-24-21 Account: 10295003



Please tick the box below to confirm that you are a UK Income or Capital Gains taxpayer and agree for Shedquarters to claim Gift Aid on your membership donation. By ticking you are confirming that you understand that you must have paid UK Income or Capital Gains Tax at least equal to the amount that will be claimed on any and all Gift Aid donations in any given tax year. Gift Aid allows Shedquarters to claim 25 pence in every pound that you donate to them.

[] Please tick box and sign

Declarations and Disclaimers:

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

Safety:

I understand that some of the activities of Shedquarters 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 Shedquarters 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. All new members are required to undergo an induction process, this involves a tour of the Shed, Fire Safety, PPE, use of machinery and Conduct rules.

[] Please tick box and sign

Privacy and General Data Protection Regulations:

I consent to the collection and use of my personal information for the purposes of managing my membership with Shedquarters, Oxon and in communicating information to me. I understand that this consent can be withdrawn at anytime in writing. I hereby consent that I have read, understood and agree to the above statement.

[] Please tick box and sign

I understand that from time to time photographs and videos may be taken within the Shed's activities. I consent to their use by Shedquarters Oxon 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 anytime in writing. I hereby consent that I have read, understood and agree to the above statement.

[] Please tick box and sign

Which of the following are you happy to use to communicate with fellow members?
Please tick all that apply to you.

Telephone []

Text []

Email []

[] Please tick box and sign below

For Office Use Only

Membership Number

Payment type

Signature of Treasurer

Other Information