Breakfast Point Men's Shed	Brea	kfast	Point	Men's	Shed
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APPLICATION FOR MEMBERSHIP (\$20 Joining Fee and \$30 per year for Membership)

I hereby apply for membership in the Breakfast Point Men's Shed, Inc at Breakfast Point.

Name: First	_ Preferred	Name		
Surname		Male/Female DOB	//	
Address				
Suburb				
Phone number	_ Mobile			
Email Address (Please write clearly)				
Spouse/Partner's Name			Member:	Y/N
Vocation/ Former Vocation				
Emergency Contact Name		Phone		

If admitted as a member, I agree to accept the concept of a Community Shed and to take an active role in both attendance and participation of this Club. I understand that the information provided in this application forms part of the requirements of membership.

I agree to read, and maintain familiarity with, all existing and future editions of the Breakfast Point Men's Shed Operations Manual, and comply with all aspects of this manual, including health and safety instructions, and other requirements consistent with the Shed's policies, and be bound by the Constitution.

I agree to reimburse the Shed for any costs incurred by the Shed, should it be necessary to call for any medical or ambulance services resulting from any incident which involves and affects me.

I accept that current or future insurance requirements may restrict membership to people less than 85 years.

I consent to my name, address, email and telephone number being included in a "Directory of Members" to be distributed ONLY to members of the Men's Shed.

Privacy Statement: Information given above is kept private and confidential and may only be used in relation to the operation of the Breakfast Point Men's Shed, Inc and shall not be used for any other purpose.

Signature	Date//
Skills	
Proposed by	Signature
Seconded by	Signature
OFFICIAL USE Date Received // Joining/Membership	o Fees Paid//
Date Admitted / / Induction / /	
Payment Methods BSB 182 512 A/C 9621 70072 Name Breakfast Point Men's S Incorporated or make cheques payable to Breakfast Point Men's	