

**Membership Application or Renewal**

Full name:

Residential address:

Email address:

Home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile phone:

Emergency contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:

The Health and Safety of Tawa MenzShed members is very important. **If any member has any disability or medical condition which might be a safety issue when working with hand or power tools** (such as epilepsy, visual field loss, previous stroke or heart attack, memory issues), **it is their responsibility to bring this to the attention of the supervisor** on duty at the shed. It is the member’s responsibility to monitor their own fitness to operate any dangerous equipment. Fitness at any given time on any given day does not imply fitness at any other time. The implied duty of care is always with the member.

MenzShed Tawa will keep records of the above details of its members. The Privacy Act states that members must be informed that these records are computerised and will only be used to conduct MenzShed Tawa business and not passed to any outside organisation. Members may, on request, receive a copy of their record and correct any errors.

In signing this Membership form and/or by paying my membership subscription, I confirm that:

* I agree to MenzShed Tawa storing information supplied by me,
* I agree to abide by the MenzShed Tawa Constitution, Operational Rules and Health & Safety Rules as amended from time to time,
* I acknowledge my responsibility for my own health and safety arising form medical conditions or disabilities as noted above,
* I accept that my name, email address and phone number will be shared with other Members, and
* I hereby pay my membership fee of $30.00 for the year ending 30th June 2021.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please take this completed form to any MenzShed open day (Tues, Thurs or Sat, 10am to 1:00pm),

OR post completed form to Secretary, MenzShed Tawa, 86 Oxford Street, Tawa, 5028,

OR send completed form as a scanned document by email to TawaMenzShed@aol.com

Payment can be made to the Supervisor at the Shed,

OR via on-line banking to the MenzShed Tawa BNZ account No. 02 0552 0040123 00,

 with your surname in the Particulars section and “Application” in the Code section of the form,

OR by cheque posted to John Melville, Treasurer, 27 Greyfriars Crescent, Tawa, 5028.

**Current members do not need to complete this form if their previously supplied details have not changed; but, by the act of paying their subscription, reaffirm the acknowledgements listed above.**



**Rules of Membership**

MenzShed Tawa has accepted the need for some basic rules, aimed at making the Shed a friendly and safe place for members and visitors.

As a member of MenzShed Tawa you accept that you will:

* Take the time to keep the Shed’s buildings and equipment tidy and in safe repair,
* Treat all other members and visitors with respect,
* Observe the health and safety standards of the Shed,
* Follow the directions of the Shed Supervisors,
* Not act to bring the Shed or its members into disrepute,
* Not use the Shed property for any unauthorised or irresponsible use,
* Not use illegal drugs, alcohol or any form of smoking in or around the Shed, and

* Not use the Shed facilities for personal gain.

As a member of MenzShed Tawa you must also undergo safety training before you attempt to use each one of the Shed’s machinery or equipment and the details of your safety training must be recorded in MenzShed Tawa’s Health and Safety Training Manual.

Updated 16 June 2020