



**'HARRY'S SHED'**  
**CITY OF CANADA BAY MEN'S SHED, Inc.**  
PO Box 871 CONCORD NSW 2137  
Phone: 9745 1487 Email: harrysshed@TPG.com.au

**APPLICATION FOR MEMBERSHIP**

I hereby apply for membership in the City of Canada Bay Men's Shed, Inc.

Name: First \_\_\_\_\_ Preferred Name \_\_\_\_\_

Surname \_\_\_\_\_ Male Female DOB: \_\_/\_\_/\_\_\_\_

Address \_\_\_\_\_

Suburb \_\_\_\_\_ Postcode \_\_\_\_\_

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 also agree to comply with safety and other requirements consistent with the Shed's policies and be bound by the Constitution. Insurance requirements may restrict membership to people under 85 years.

Please understand we may request you to undergo a medical assessment to ascertain whether you are safely able to perform the activities in the Shed. In this respect, you consent to undergoing such assessments and to the results of the same being released to The Committee.

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 and partners.

Privacy Statement: Information given above is kept private and confidential and may only be used in relation to the operation of 'Harry's Shed' City of Canada Bay 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 \_\_\_/\_\_\_/\_\_\_    Receipt # \_\_\_\_\_    Joining Fee \_\_\_\_\_ Paid  
Date Admitted \_\_\_/\_\_\_/\_\_\_    Membership Officer \_\_\_\_\_    Membership \_\_\_\_\_ Paid  
Induction    \_\_\_/\_\_\_/\_\_\_    Letter of welcome sent    \_\_\_/\_\_\_/\_\_\_

A partnership project of the City of Canada Bay Men's Shed, Inc and the City of Canada Bay