



# Membership Form

## Ashburton Menzshed Inc. Membership Application/Renewal

Membership is open to all persons approved by the committee and is for the period from 1st April to 31st March each year. Member name tags are issued to all participants and must be worn while in the Shed. New members please complete the following details (both sides of the page), read the Health and Safety Plan and sign. If renewing your membership please complete your name, payment option plus any changes to existing details.

**Membership fees** (including GST):

1 Apr 2024 – 31 Mar 2025	\$40.00
1 Jan 2025 – 31 Mar 2025	\$20.00

**Name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_ **Email** \_\_\_\_\_

\_\_\_\_\_ **Cell phone Number** \_\_\_\_\_

**Postcode** \_\_\_\_\_ **Date of birth** \_\_\_\_\_

**What ethnicity are you** (optional) \_\_\_\_\_

**Emergency contact person's name** \_\_\_\_\_ **Relationship to you** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Cell phone Number** \_\_\_\_\_

**Medical** *(Please be open with your response, as this information is not intended to restrict your participation in the Shed, but will be a useful guide in keeping people safe).*

Have you any health condition(s), or are you on any medication(s) that may affect your capacity to safely interact with machinery?

**What are/were your work life skills?** \_\_\_\_\_

**What are your hobbies?** \_\_\_\_\_

**Payment** (please tick)

- Electronic bank transfer to Account Number: 03-1354-0498787-00  
(Please ensure you include your surname + SUBS as "reference")
- Cash send to: 8 Williams St, Ashburton 7700

I agree that membership of Ashburton Menz Shed Inc. allows the information on this application form and associated documents, to be used in accordance with the provisions of the Privacy Act 1993, or for the purposes of research.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please sign Membership rules (overleaf) and Health and Safety Policy**

**Office use only:**

Committee approved membership on (date) \_\_\_\_\_

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Membership fee paid              | <input type="checkbox"/> Receipt issued (if required) | <input type="checkbox"/> Name tag made                     |
| <input type="checkbox"/> Membership entered into database | <input type="checkbox"/> Photos permitted             | <input type="checkbox"/> Subscribed to newsletters/updates |
| <input type="checkbox"/> Induction completed              | <input type="checkbox"/> Handbook given               | <input type="checkbox"/> H & S interview and dots assigned |



# Membership Form

## ASHBURTON MENZ SHED INC. MEMBERSHIP RULES

At the Ashburton Menz Shed Inc., just as you would expect at all good clubs and organisations, we need to establish a few ground rules, these rules are aimed to make this place a friendly and safe place for people to come to, and return as they wish.

To maintain membership of the Ashburton Menz Shed Inc. You agree to abide by the following:

- It is expected that members will to the best of their abilities maintain the property, buildings and equipment in good order.
- Members will act appropriately and maintain good standards.
- No non-prescription drugs, or smoking will be permitted in or around the Menz Shed Inc (please refer to designated smoking area).
- Animals are not permitted in the Shed.
- Social gatherings involving alcohol will not be permitted during Shed (workshop) opening hours.
- Shed facilities are not to be used for personal monetary gain.
- No unauthorised, deliberate, or irresponsible actions or misuse of Shed property will be permitted. Nor will actions that bring the Shed or its members into disrepute.
- Permission must be gained from the Shed Co-ordinator prior to displaying posters, notices etc in the Shed.
- Deliberate acts or failure to observe safety or hygiene standards, working in unsafe manner, failing to make proper use of fire protection or safety equipment, will not be tolerated.
- All matters affecting the health, safety and welfare of members and visitors must be reported to the Shed Co-ordinator or a Supervisor.
- Rules may be amended or added to from time to time to reflect changes required by legalisation, or the membership as a whole.

(Tick)

- I have read and understand the above Ashburton Menz Shed Inc. rules, and I acknowledge I must undergo safety training before attempting to use any workshop machinery or equipment.
- Should I undertake safety training I will be allocated a safety rating which shall provide a guide to others of my level of competency and necessary supervision.
- I give my express permission without reward for photos etc taken of me and my involvement in shed projects to be used in any media for the promotion of Ashburton Menz Shed.

Member signature \_\_\_\_\_

Date \_\_\_\_\_



# Membership Form

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## *Health and Safety Policy*

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Ashburton Menzshed is committed to providing a healthy and safe working environment for all members, visitors, and contractors.

**Anyone who refuses to comply to shed H & S policies, safe working practise, or fails to follow specific safety risks plans, or instructions, will be asked to leave the site.**

Our aim is to:

- Provide and maintain facilities for the health and safety of all workplace personnel contractors' customers and the general public
- Ensure all personnel are aware of their responsibilities for the safety of themselves, their fellow Members, and the public.
- Develop procedures for identifying and controlling hazards.
- Ensure that personnel are not exposed to uncontrolled hazards and are informed of any hazards, which exist.
- Provide and enforce the mandatory use of protective safety clothing and equipment.
- Ensure all personnel are informed of and are aware of emergency and accident procedures.
- Provide personnel with adequate training and supervision.
- Ensure there is active member involvement in all Health and Safety matters.
- Ensure that all current legislation is adhered to including documentation in the shed Health & Safety file and all subcommittee meeting notes.

I have read and understood the Health and Safety Plan of the Ashburton Menzshed.

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

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

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



# Membership Form

## Health & Safety Induction Safety Rating

In accordance with member safety and use of equipment and future training please let us know about your experience with the following:

### First Aid

I have current First Aid Certificate Yes / No

### Woodwork

Panel Saw	Yes / No	Radial arm Saw	Yes / No	Saw Bench	Yes / No
Mitre Saw	Yes / No	Bandsaw	Yes / No	Skill saw	Yes / No
Chain saw	Yes / No	Thicknesser	Yes / No	Dresser Planner	Yes / No
Router	Yes / No	C N C Router	Yes / No	Table sander	Yes / No
Wood lathe	Yes / No	Linisher Sander	Yes / No	Drill Press	Yes / No

### Engineering

Welder stick	Yes / No	Welder Mig	Yes / No	Welder spot	Yes / No
Bandsaw	Yes / No	Drill Press	Yes / No	Lathe	Yes / No
Linisher	Yes / No	Mill	Yes / No	Plasma cutter	Yes / No
Taps and dies	Yes / No	Reamers	Yes / No	Panel folder	Yes / No
Grinders	Yes / No	Cut off Wheels	Yes / No	Hyd Ram bender	Yes / No

### Paint / Garden

Spray Gun and cleaning	Yes / No	Use of Chemicals	Yes / No
Mixing of paint	Yes / No	Timber stains and treatment	Yes / No
Ventilation safety	Yes / No		

### Computer IT section

Emails	Yes / No	Web Search	Yes / No	Word Processing	Yes / No
Printing	Yes / No	You Tube	Yes / No	CAD/CAM	Yes / No
CNC Routing	Yes / No				
Other Programs List _____					

I \_\_\_\_\_ acknowledge I have answered all of the above honestly confirming my knowledge and ability to safely use approved plant as a financial member of Ashburton Menzshed.

I further agree to seek guidance and or training when I am not confident, or skilled to carry out use of all or any of the above plant. Further if I am ill or suffering an injury, I agree to seek assistance with use of above plant.

I agree to comply to shed rules and health and safety.

Signed (Member) \_\_\_\_\_

Date \_\_\_\_\_

**Office use only:**

Induction interview completed by \_\_\_\_\_ on (date) \_\_\_\_\_

Assigned coloured dots: