

**Membership Application Form**

March 2018 v4

Forename.....Surname.....

Full Home Address.....

Post code.....Home phone number.....

e-mail address.....Mobile number.....

By completing and signing this form you are:

- applying to become a member of Romsey Men’s Shed,
- agreeing that your details will be included in the Romsey Men’s Shed database,
- agreeing to abide by the Code of Conduct and Workshop Operational Rules of Romsey Men’s Shed,
- agreeing that the use of any tools or machinery in the workshop or engaging in any other Romsey Men’s Shed activity will be at your own risk,
- waiving any rights to make any claim against Romsey Men’s Shed, its Trustees or its members arising from your use of tools or machinery in the workshop or whilst engaged in any other Romsey Men’s Shed activity,
- and agreeing to pay the Members’ Annual Subscription to Romsey Men’s Shed.

Signed..... Date.....

*Your details will be managed under our Data Protection Policy: they will be kept confidential, used only for Romsey Men’s Shed purposes and will not be passed on to any other parties. The subscription year is from April to March. The subscription is payable each year in one instalment in April or in two equal instalments in April and October if preferred. Upon joining the subscription will be pro rata to the end of the subscription year.*

**Please turn over to complete more details**

Name.....

### Gift Aid

If you are a taxpayer Romsey Men's Shed can reclaim from the tax you pay, 25p for every £1 you pay in subscriptions to Romsey Men's Shed. If you would like Romsey Men's Shed to claim Gift Aid on your subscription please complete the declaration below.

I confirm that I am a taxpayer and that I would like Romsey Men's Shed to claim Gift Aid on my annual subscription in the current and all future years.

Signed.....Date.....

*Please notify Romsey Men's Shed if you would like to cancel this declaration, change your name or your home address or no longer pay tax.*

Please enter details of your next-of-kin, other relatives or friends that we could contact in the event of an emergency and details of any relevant medical history that we should be aware of.

Next-of-kin Name and relationship	Address	Town and Post Code	Home and/or work phone	Mobile

Medical details and medications if relevant

### For Romsey Men's Shed use - Application approved

Trustee.....Date.....

Trustee.....Date.....