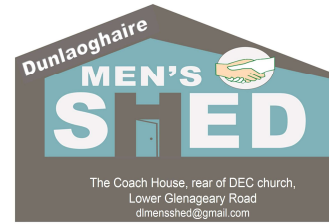




# Shedder Application Form to join a Men's Shed

Name of Shed:

DUN LAOGHAIRE MEN'S SHED



New Shedder's Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Eircode / Postcode: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
OPTIONAL

Current Occupation: \_\_\_\_\_

**Note:** Shedders must be 18 years of age and over.

EMERGENCY CONTACT PERSON: \_\_\_\_\_ Phone: \_\_\_\_\_

**DISABILITIES:** Have you any Health conditions or are you on any Medication that may affect your capacity to safely operate machinery? Please note, an honest response in this section may not necessarily restrict what you can or cannot do but will improve safety.

\_\_\_\_\_  
\_\_\_\_\_

What are your Skills and Hobbies? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By signing this form I am agreeing to the Men's Shed Vision, Mission, Ethos and Values, and to sticking to the IMSA Anti-Bullying Policy. I confirm that the above information about me is correct.

New Shedder Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

