



Application for Membership Form

Date of application or update:- ___/___/___

Shed Name:- _____
Shed Address:- _____
Shed Postal Address (if different from above):- _____
Shed Phone:- _____
Shed email:- _____ Website (if you have one):- _____

Representative name:- _____ Position:- _____
Contact Phone number:- _____ Contact email address:- _____

Alternative Contacts

Name:- _____ Position:- _____
Contact Phone number:- _____ Contact email address:- _____
Name:- _____ Position:- _____
Contact Phone number:- _____ Contact email address:- _____

Governance Structure:

Is your shed an Independent Incorporated Association? Yes/No
Is your shed Auspiced by another organisation? Yes/No
(please name):- _____

Does your Shed have full OH&S policies in place and are such policies enforced by the Shed Committee? Yes/No
Do you induct your members on the use of each piece of machinery? Yes/No
Does your Shed hold regular committee meetings? Yes/No
Does your Shed provide all members with a full financial report each year? Yes/No

Insurance: AMSA policy Other

Operating Hours and Days:

Monday/Tuesday/Wednesday/Thursday/Friday/Saturday/Sunday Hours:-

Local Government: Area:- _____ Liaison:- _____ Support:- _____

Building Ownership: _____

Membership

Number of members in your shed:- _____
Do you charge a membership fee?- Yes/No - If so, how much per Annum or Month \$ _____.00

Activities that your shed offers:

Woodwork Metalwork Boat repair/building
 Leatherwork Printmaking Model making
Ham radio
 Upholstery projects for the community Other

Is your shed:

accessible to people with disabilities providing mentoring opportunities for young people

What Support would you like from TMSA

Programs Activities Help with Obtaining Funding Representation
Other _____

Signed:- _____ Position:- _____ Date:- ___/___/___

Print Name:- _____

We agree with TMSA holding and using this information, to assist TMSA and its Member Sheds _____ -
Yes/No

Office section

Joining Fee paid:- Yes/No/NA Cheque/Direct Deposit/Money Order/Cash/Other

Annual fee paid:- Yes/No Cheque/Direct Deposit/Money Order/Cash/Other Date paid/deposited:- ___/___/___