

# Quail Creek Woodcrafters



## Membership Application and Skills Inventory

(Please print clearly)

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

**ADDRESS:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**ANNUAL Membership: \$ 40.00 FOR 2017.**

Check/Cash attached. \*

Make check out to: Quail Creek Woodcrafters Club.

My experience:  Basic (I can handle both kinds of screwdrivers)

Intermediate (I have often used most power and hand tools)

Advanced (I am proficient with nearly all power tools, can build my own furniture if I choose - and still have all of my fingers)

Specific skills? \_\_\_\_\_

What kinds of projects would you like to do at the QC Woodshop?  
\_\_\_\_\_

I can help with the following activities:

Teaching/Equipment training \_\_\_\_\_

Safety Monitor (Post-construction)

Organization Activities \_\_\_\_\_

e-mail me for follow-up contact.

Call me for follow-up contact.

**\*Please drop off the application and your check at our Shop.**

**QUAIL CREEK POA WAIVER AND RELEASE**

***Quail Creek Woodcrafters Club***

The undersigned desires to use the equipment and facilities provided by the Quail Creek Fine Arts and Technology Center. By executing this Waiver and Release, the undersigned hereby acknowledges and agrees that the undersigned is solely responsible for his/her actions while using the Quail Creek Fine Arts and Technology Center and that neither Robson Communities or the POA nor any of its respective affiliates, officers, employees, agents or representatives, is responsible for the undersigned's actions or safety while engaging in activities at the Quail Creek Fine Arts and Technology Center. The undersigned hereby releases and agrees to release all of the foregoing parties from any claims, liabilities, actions, damages, costs and expenses that arise as a result of, or relate in any way to, the undersigned's use of the Quail Creek Fine Arts and Technology Center and its facilities and equipment.

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

Club Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**QUAIL CREEK WOODCRAFTERS CLUB SAFETY PLEDGE:**

- A. I have read and understand our procedures and rules and will do my best to follow them.**
- B. I understand the Monitor is the interpreter of these procedures and rules and I will follow directions from the Monitor.**
- C. I understand that I must maintain my annual membership on a continuous basis to participate in the woodshop. (Any member who allows his/her membership to lapse for one or more years must retake the Safety Training Class prior to using the woodshop. Such member may be allowed to rejoin the shop without taking the Safety Training Class if all back and current dues are paid in full.)**

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**Signature of Member**

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**Date**