

SAFETY COUNCIL CAMPAIGN
BARBERTON-SOUTH SUMMIT SAFETY COUNCIL
503 W. Park Ave.
Barberton, OH 44203

NEW ENROLLMENT FORM

We are in accord with an effort to reduce the number of accidents occurring to our employees, and desire to enter our company in the safety campaign program, beginning January 1 and ending December 31.

We will cooperate with the Safety Council in furnishing reports requested and will make every effort to have a representative of our company attend the meetings sponsored by the Safety Council.

Today's Date _____

Company Name _____ Phone _____

Fax _____

Address _____ City _____ Zip _____

Email Address _____

Average Number of Employees _____

Type of work _____

BWC Policy Number _____

Enrollment Year _____

Name _____

Signature _____

Title _____

To Be Completed By the Safety Council
Safety Council Account Number
(Must be completed before forwarding to BWC)

_____ / ____ ____ / ____ ____ / ____ ____

Please complete and mail to
Barberton-South Summit Chamber of Commerce
503 W. Park Ave.
Barberton, OH 44203
Or fax to 330-745-4559