

# TUSCARAWAS VALLEY SAFETY COUNCIL

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## OHIO SAFETY COUNCIL NEW ENROLLMENT FORM for FY19 (July 1, 2018 - June 30, 2019)

In an effort to reduce the number of workplace accidents and to share resources and information on accident prevention, risk management and workers' compensation in Ohio, the BWC's Division of Safety & Hygiene and your local safety council co-sponsor this program.

**In signing this enrollment form, the employer makes a commitment to send representatives to the majority of safety council meetings and to submit semi-annual reports by the deadline dates. Please fill in all spaces. We do communicate via e-mail.**

Company Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax \_\_\_\_\_

Website \_\_\_\_\_ E-mail \_\_\_\_\_

Average Number of Employees \_\_\_\_\_

Type of Work \_\_\_\_\_

BWC Policy Number \_\_\_\_\_

Enrollment Year \_\_\_\_\_

Name \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_

### Tuscarawas Valley Safety Council Membership Investment Schedule (Free for Tuscarawas County Chamber Members)

1-25 Employees \$170.00	26-50 Employees \$200.00	51+ Employees \$250.00
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**I'm A Chamber Member**  
( No additional fee for Safety Council)

**Invoice me**

**Check Included**  
(Checks Payable to the Tuscarawas  
County Chamber of Commerce)

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