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**NOTE:** This form performs best on the latest versions of Google Chrome, Microsoft Edge, and select mobile browsers.

☒ Private Event ☐ Public Event 

● Our organization wants to register as a Safe + Sound Week participant and wishes to have our name, city, and state recognized on the Safe + Sound Week map on the website (e.g. ACME Construction – Any town, USA).

☐ Our organization wants to register as a Safe + Sound Week participant, but does not wish to be recognized on the Safe + Sound Week map on the website.

*Note: If specified above, the **name of your business or organization and the location** will be added to the public Safe + Sound Week map.*

Full business name

Select One 

Contact Email

☐ I want my email address posted on the public Safe + Sound Week map on the website so people can contact me about our private event.

☐ I do not want my email address posted on the public Safe + Sound Week map on the website so people can contact me about our private event.

☒ Yes ☐ No

City Name

State 

- ☐ Communication from industry/trade association
- ☐ Communication from safety and health professional organization
- ☐ OSHA QuickTakes
- ☐ OSHA Website
- ☐ Safe + Sound Campaign Email List Serv
- ☐ National/Local/Trade Press
- ☐ Social Media
- ☐ I don't know/remember
- ☐ Other (Fill in Blank)

Other

- ☐ We do not have a safety and health program.
- ☐ We are just starting our safety and health program.
- ☐ Our safety and health program includes management leadership, worker participation, and a systematic approach to find and fix hazards.
- ☐ Our safety and health program follows OSHA's Recommended Practices for Safety and Health Programs.
- ☐ Our safety and health program is certified to SHARP, VPP, ANSI Z10, and/or ISO 45001.
- ☐ Other (Fill in Blank)

Other

Submit

Clear

*If your organization is registering multiple sites/locations, please contact [safeandsoundcampaign@dol.gov](mailto:safeandsoundcampaign@dol.gov) to receive an excel spreadsheet that can be used to submit your information.*

Submissions are not added to the map automatically. New additions are reflected within 1-2 business days.

✕



Full business name

Contact Email

☒ Yes ☐ No

City Name State 

- ☐ Communication from industry/trade association
- ☐ Communication from safety and health professional organization
- ☐ OSHA QuickTakes
- ☐ OSHA Website
- ☐ Safe + Sound Campaign Email List Serv
- ☐ National/Local/Trade Press
- ☐ Social Media
- ☐ I don't know/remember
- ☐ Other (Fill in Blank)

Other

## 1

Name of your event

mm/dd/yyyy - 08/2020 dates only

HH:MM AM|PM

HH:MM AM|PM

(Please include a brief description of the event planned, i.e., training, demonstrations, presentations, toolbox talks, equipment inspections, etc.; and the address of the event) - Limit to 1500 characters (including spaces)

full URL

The Web site being linked must have a posted privacy policy that clearly describes the organization's information handling practices.

Event Contact Name

Event Contact Email	Event Contact Phone Number
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Submit Clear

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