



Please print clearly, then proceed to the on-site registration counter for your admission badge.

April 1 to 3

Greater Columbus Convention Center

BWC policy number (required) | _____ |

First name | _____ |

Last name | _____ |

Working title | _____ |

Company | _____ |

Address | _____ |

City | _____ | State | _____ | ZIP code | _____ |

Phone ((_____)) | _____ | - | _____ | Fax ((_____)) | _____ | - | _____ |

E-mail | _____ |

(required to receive registration confirmation)

I am registering as

- AT Attendee
- EX Exhibitor

- 12 Safety consultation
- 13 Safety product/service
- 14 Service
- 15 Transportation
- 16 Other _____

Primary business of my organization

- 1 Agriculture
- 2 Construction
- 3 Distribution
- 4 Education
- 5 Food and beverage
- 6 Government
- 7 Health care
- 8 Insurance/risk management
- 9 Manufacturing
- 10 Mining/quarrying
- 11 Public utilities

Number of people employed at my facility

- 1 1 to 9
- 2 10 to 99
- 3 100 to 249
- 4 250 to 499
- 5 500 to 999
- 6 1,000 to 2,499
- 7 2,500 +

Number of years in the safety and health industry

- 1 1 to 4
- 2 5 to 9
- 3 10 to 14
- 4 15 +

My age group

- 1 Under 18
- 2 18 to 29
- 3 30 to 39
- 4 40 to 49
- 5 50 to 64
- 6 65 +

My role in the purchase of safety and health products for my business

(check all that apply)

- 1 Research
- 2 Recommend
- 3 Purchase
- 4 None of the above

Number of safety congress events attended in previous years

- 1 0
- 2 1 to 4
- 3 5 to 9
- 4 10 to 14
- 5 15 +

Registration is FREE and open to the public