## **Health and Safety Fair Application**



## **Contact Information**

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Brief description of your organization:

Demonstrations:

Please give a brief description of any demonstrations your organization will be setting up for display:

Electricity Needed Yes No

Free Risk Assessments: Please list any give-aways, literature, or assessments you will be offering to the public:

## Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

## **Our Policy**

All applications are subject to approval by the Apple-Scrapple Committee. Not all applications will be accepted due to limited space, liability and/or conflict of interest of all participants of the Health and Safety Fair. The Health and Safety Fair is not an appropriate venue for fundraising events or product sales.