



2019 GEAPS Safety Awards Program

FACILITY INFORMATION

Facility Name _____ City _____

Company _____ State/Prov _____

Facility Contact _____ (manager/supervisor) GEAPS Member? Yes No

Was this facility registered for the 2018 Safety Awards Program?

Yes — skip to applicant information

No — provide complete facility details

Street Address _____ (no PO Box)

ZIP/PC _____ Phone _____

SAFETY AWARDS PROGRAM CONTACT INFORMATION

Safety Awards Program Contact Name _____ Email _____

Mailing to Facility Above?

Yes — skip to enrollment

No — provide contact details

Street Address _____ (no PO Box)

City _____ State/Prov _____

Zip/PC _____ Phone _____

ENROLLMENT

Option 1 - \$95

Facility being entered has a current GEAPS member. If this is not the above facility contact, current GEAPS member located at facility is:

Name _____

Option 2 - \$140

Facility being entered does not have a current GEAPS member.

Go Green
Choose this option to receive only a Safety Awards certificate, not the full plaque.

Sign, enclose payment and send the application to GEAPS to enroll this facility in the 2019 Safety Awards Program. To receive an award, the facility must complete the 2019 calendar year without a work-related lost-time injury or illness. To verify lost-time accident records, applicants must send GEAPS a copy of their completed 2019 OSHA 300A form or complete the online form for the facility, along with the total number of personnel hours worked at the facility during the 2019 calendar year. For facilities outside the U.S., a signed letter on company letterhead stating that there were no lost-time injuries or illnesses and reporting the total personnel-hours worked will be accepted.

Applicant Signature: _____ Date: _____

PAYMENT

Payment must be received with application.

Check (enclosed)

Applications (including payment) must be received by Jan. 7, 2019.
to: GEAPS Safety Awards Program, 4800 Olson Memorial Hwy, Suite 150, Golden Valley MN 55422.
Applications may be faxed to (763) 710-5328.