

Registrant's name _____

How did you learn about conference? (check all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> ASSE newsletter or email | <input type="checkbox"/> Employer or Co-worker | <input type="checkbox"/> Management / employer |
| <input type="checkbox"/> ASSE website | <input type="checkbox"/> Industry association | <input type="checkbox"/> Newspaper |
| <input type="checkbox"/> Oregon OSHA | <input type="checkbox"/> Insurance carrier | <input type="checkbox"/> Public service announcement |
| <input type="checkbox"/> SHRM newsletter | <input type="checkbox"/> Labor association | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Direct mail flyer/program | | |

Attendee profile (check one)

- | | |
|-------------------------------------|--------------------------------------|
| <input type="checkbox"/> Employee | <input type="checkbox"/> Owner |
| <input type="checkbox"/> Management | <input type="checkbox"/> Consultant |
| | <input type="checkbox"/> Other _____ |

Are you a safety committee member?

- Yes No

Indicate which industry you represent: (check one)

- | | | |
|--|--------------------------------------|---|
| <input type="checkbox"/> Construction | <input type="checkbox"/> Health care | <input type="checkbox"/> Lumber/wood products |
| <input type="checkbox"/> Food and kindred products | <input type="checkbox"/> Agriculture | <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Warehousing/distribution | <input type="checkbox"/> Government | <input type="checkbox"/> Other _____ |

Part 2 – Session Selection

For EACH TIME PERIOD circle the (1) next to the session you would most like to attend. Also circle the (2) next to the session that is your second choice for that time period.

EXAMPLE:
 1 2 Example class A
 1 2 Example class B
 1 2 Example class C

Wednesday, October 21

6:45 a.m.

- Yes, I wish to attend the Early-Bird Walk

8:15-9 a.m.

- Yes, I wish to attend the Welcome and Keynote: Big Trouble

9:30 a.m.-12:30 p.m. SESSION 1

- | | | |
|---|---|--|
| 1 | 2 | Big Trouble (repeated at 1:30 p.m.) |
| 1 | 2 | Preventing Sprains and Strains: Best Practices at Work |
| 1 | 2 | Driven to Distraction |
| 1 | 2 | Safety Committee Operations - "Simply Done Right!" |
| 1 | 2 | Occupational Health Psychology (2-part session) |
| 1 | 2 | Dodging the Bugs: Infection Control at Work |

1:30-4:30 p.m. SESSION 2

- | | | |
|---|---|---|
| 1 | 2 | Big Trouble (REPEAT) |
| 1 | 2 | Employee Accountability: A Path to High Performance |
| 1 | 2 | Chemical Exposures, You and Your Employees: The Hows, Whys, Ifs and Whats |
| 1 | 2 | Hazard ID: Helping Safety Committees to Identify and Control Hazards (1:30-4 p.m) |
| 1 | 2 | Advanced Fall Protection |
| 1 | 2 | Reducing Injury Rates Through Hiring Practices and Job Certification |
| 1 | 2 | Safety Risk Recognition |

Thursday, October 22

7 a.m.

- Yes, I wish to attend the Early Morning Energy Booster

8-11:45 a.m. SESSION 3

- | | | |
|---|---|--|
| 1 | 2 | Effective Partnerships for Controlling Injuries and Workers' Compensation Claims |
| 1 | 2 | Health Issues in Construction |
| 1 | 2 | Exercise and Nutrition: Building a Foundation of Youth in an Aging Workforce |
| 1 | 2 | Office Ergonomics: The Basics and Beyond |
| 1 | 2 | MSHA: Inspections, Top Violations, the Citation Process, and How to Create a Safer Workplace |
| 1 | 2 | Identifying and Managing Your Confined Spaces |
| 1 | 2 | Ladder Safety |

1:30-4:30 p.m. SESSION 4

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|---|---|--|
| 1 | 2 | Safety Training and Your Multicultural Workforce |
| 1 | 2 | Respiratory Protection and Hearing Conservation (2-part session) |
| 1 | 2 | Engineering Solutions for Ergonomic Challenges (2-part session) |
| 1 | 2 | Safe Forklift Operations - A Users Guide |
| 1 | 2 | What to Expect from an Oregon OSHA Inspection and What to Do After an OSHA Inspection (2-part session) |
| 1 | 2 | Bridging the Generation Gap |
| 1 | 2 | Accident Investigation |

Special accommodations

- Check if you require special services. Attach a written description of your needs.