

Listing Inclusion Form
FindaSafetyTrainer.com

Terms: Upon completion of this form and receipt of payment in full, National Safety Compliance, Inc. will add to the FindaSafetyTrainer.com website the information listed below. This information will remain published on the FindaSafetyTrainer.com website for the remainder of the current calendar year. Listee agrees that the information provided is accurate and that all websites which are listed below contain only material that is related to safety training and is in no way offensive or objectionable. Website listed below may not include links or product listings that compete with the products sold by National Safety Compliance, Inc. If at any time the listee is found to be in violation of any of the above stated terms, their listing will be immediately removed. National Safety Compliance, Inc. and its representatives have the right, at their discretion, to deny a listing to any person, company or organization.

If you have any questions about this inclusion service or website, please contact us prior to submitting this form. We may be contacted toll-free at 1-877-922-7233 or by email at: info@findasafetytrainer.com

Information to be published as part of the listing:

Company Name: _____
Contact Person: _____
Phone #: _____ Fax #: _____
Website and or Email: _____

Other required information (will not published as part of the listing):

Contact Person: _____ Contact Phone Number: _____
Street Address: _____
City, State, Zip: _____

Listing Placement Information:

Please check each **location** under which your listing is to appear:

- | | | | | | | | |
|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|--|
| <input type="checkbox"/> AL | <input type="checkbox"/> DE | <input type="checkbox"/> IN | <input type="checkbox"/> MA | <input type="checkbox"/> NV | <input type="checkbox"/> OH | <input type="checkbox"/> TN | <input type="checkbox"/> WI |
| <input type="checkbox"/> AK | <input type="checkbox"/> DC | <input type="checkbox"/> IA | <input type="checkbox"/> MI | <input type="checkbox"/> NH | <input type="checkbox"/> OK | <input type="checkbox"/> TX | <input type="checkbox"/> WY |
| <input type="checkbox"/> AR | <input type="checkbox"/> FL | <input type="checkbox"/> KS | <input type="checkbox"/> MN | <input type="checkbox"/> NJ | <input type="checkbox"/> OR | <input type="checkbox"/> UT | <input type="checkbox"/> Nationwide page |
| <input type="checkbox"/> AZ | <input type="checkbox"/> GA | <input type="checkbox"/> KY | <input type="checkbox"/> MS | <input type="checkbox"/> NM | <input type="checkbox"/> PA | <input type="checkbox"/> VT | <input type="checkbox"/> All (51 pages) |
| <input type="checkbox"/> CA | <input type="checkbox"/> HI | <input type="checkbox"/> LA | <input type="checkbox"/> MO | <input type="checkbox"/> NY | <input type="checkbox"/> RI | <input type="checkbox"/> VA | |
| <input type="checkbox"/> CO | <input type="checkbox"/> ID | <input type="checkbox"/> ME | <input type="checkbox"/> MT | <input type="checkbox"/> NC | <input type="checkbox"/> SC | <input type="checkbox"/> WA | |
| <input type="checkbox"/> CT | <input type="checkbox"/> IL | <input type="checkbox"/> MD | <input type="checkbox"/> NE | <input type="checkbox"/> ND | <input type="checkbox"/> SD | <input type="checkbox"/> WV | |

Please check each **subject** under which your listing is to appear:

- | | | |
|---|--|---|
| <input type="checkbox"/> Asbestos | <input type="checkbox"/> Eye Protection | <input type="checkbox"/> Lockout / Tagout |
| <input type="checkbox"/> Back Safety | <input type="checkbox"/> Fire Extinguisher | <input type="checkbox"/> Machine Guarding |
| <input type="checkbox"/> Bloodborne Pathogens | <input type="checkbox"/> First Aid | <input type="checkbox"/> Office Safety |
| <input type="checkbox"/> Chemical / MSDS | <input type="checkbox"/> Forklift | <input type="checkbox"/> Orientation |
| <input type="checkbox"/> Confined Space | <input type="checkbox"/> HAZWOPER | <input type="checkbox"/> Respiratory |
| <input type="checkbox"/> Crane / Rigging | <input type="checkbox"/> Hearing Conservation | <input type="checkbox"/> Scaffold |
| <input type="checkbox"/> Driving | <input type="checkbox"/> HIPPA | <input type="checkbox"/> Sexual Harassment |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Hoists / Overhead Crane | <input type="checkbox"/> General Ind. 10 or 30 hour Course |
| <input type="checkbox"/> Ergonomics | <input type="checkbox"/> Kitchen | <input type="checkbox"/> Construction Ind. 10 or 30 hour Course |

Payment Information

ALL fees are based upon a calendar year. No prorating.

Cost:
\$25.00 per year, includes listing on up to 5 pages
\$2.00 per page for additional listings

Payment Option 1: Credit Card (MasterCard, VISA, American Express, or Discover)

Credit Card Billing Address:

Card#: _____

Company: _____

Expiration Date: ____ / ____

Address: _____

Name on Card: _____

City/State: _____

CVV2 (3-digits): _____

Zip: _____

Payment Option 2: Billed (NOTE: Listing will not be active until payment is received in full.)

Company Name: _____

Contact Name: _____

Address: _____

City/State: _____

Zip: _____