



WARREN COUNTY SAFETY COUNCIL 2017-18

Bureau of Worker's Compensation

Division of Safety & Hygiene

Company: _____ Main Contact: _____

CEO/CFO/GM: Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

BWC Policy #: _____ Self-Insured: Yes ___ No ___

Non Group Rated Employers actively participating in the Warren County Safety Council program July 31, 2017–June 30, 2018, can earn 2% for meeting all of the eligibility requirements and a 2% performance rebate for reducing either frequency or severity by 10%, or with maintenance of both frequency and severity at zero. (Company must meet all eligibility requirements to be eligible for performance rebate.)

Group Experience Rated Employers actively participating in the Warren County Safety Council program July 31, 2017–June 30, 2018 can earn 2% performance rebate for reducing either frequency or severity by 10%, or with maintenance of both frequency and severity at zero. (Company must meet all eligibility requirements to be eligible for the performance bonus.)

Group Retrospective Rated Employers actively participating in the Warren County Safety Council program July 31, 2017–June 30, 2018 can earn 2% participation rebate (Company must meet all eligibility requirements to be eligible for the participation bonus.)

Eligibility Requirements:

1. **Enrollment deadline July 31, 2017**
2. **Attend 10 meetings or events**, at least 8 through safety council's monthly meetings. Option to gain credit for up to two meetings through attendance at: Ohio Safety Congress – max of 1 meeting credit for event, attend 1 ed. session, follow continuing education instructions, submit documentation to WCSC. Division of Safety & Hygiene safety training course – max of 1 meeting credit per course, download certificate from www.bwclearningcenter.com, submit documentation to WCSC. Industry-specific safety training – max of 1 meeting credit per training, documentation required, submit documentation to WCSC
3. A CEO/CFO or Senior Level Manager must attend one safety council meeting.
4. Submit **semi-annual reports** for the January-December 2017 calendar year.

Signature: _____ Title: _____

Date _____ (Enrollment deadline 07/31/17)

By July 31, 2017, please return completed form and \$100 for the Enrollment Fee made out to Lebanon Area Chamber of Commerce:

Lebanon Area Chamber of Commerce
212 N. Broadway, #2, Lebanon, OH 45036
Info: ReneeWisser 513.932.1100 or Renee@LebanonChamber.org

(Office Use Only) Safety Council Account Number

_____ / ____ / ____ / ____