U S VIRGIN ISLANDS DEPARTMENT OF LABOR
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH

HAZARD RECOGNITION WORKSOP

REGISTRATION FORM

Please complete form and fax back to (340) 713-3422

NAME:_____

DEPARTMENT:_____

CONTACT NUMBER:_____

EMAIL ADDRESS:_____

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PLEASE INDICATE WHICH SESSION YOU'LL BE ATTENDING.
8:00 am – 12:00 pm

_____ **St. Thomas-Monday, September 28, 2015**
UVI Sport & Fitness Center, Rm. 210

_____ **St. Croix-Tuesday, September 29, 2015**
Renaissance Carambola Beach Resort & Spa

For additional information contact Virgin Islands Department of Labor, Division of Occupational Safety & Health office at (340) 713-3414.