COMPANY NAME and/or LOGO HERE

Tailgate Safety Training Sign-In Sheet

Training Date _____ Job-site Location _____

Training Topic(s) _____

Training Done By _____ *(signature)* _____

Actions to Do _____

_____

Names of Workers Attending

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

_____ _____

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