IATSE TRAINING TRUST FUND

OSHA 10/ GENERAL ENTERTAINMENT SAFETY©

WHEN

SUNDAY, MARCH 20, 2016 MONDAY, MARCH 21, 2016 8AM – 4PM EACH DAY

WHERE

DETROIT, MI

COURSE DESCRIPTION

This training covers OSHA policies, procedures, and standards, as well as general industry safety and health principles. Topics include scope and application of the OSHA general industry standards. Special emphasis is placed on those areas that are the most hazardous, using OSHA standards as a guide.



PROGRAM

OSHA 10/GENERAL ENTERTAINMENT SAFETY© has been developed by the IATSE Entertainment & Exhibition Industries Training Trust Fund (IATSE TTF). The training consists of a two-day OSHA 10 course customized for and using examples from the Entertainment Industry. Upon completion, you will receive your OSHA 10 and IATSE TTF completion cards.

SPACE IS LIMITED APPLY EARLY!

Complete an application and submit it to:

IATSE Entertainment & Exhibition
Industries Training Trust Fund
10045 Riverside Drive
Toluca Lake, CA 91602
F: (818) 980-3496

E: info@iatsetrainingtrust.org

OSHA 10/GENERAL ENTERTAINMENT SAFETY© APPLICATION

DETROIT, MI | MARCH 20TH & 21ST 2016

To be eligible for courses, you must work in one or more of the crafts or classifications represented by the IATSE or affiliated unions, under the collective bargaining agreement(s).

You must submit an application if you are interested in attending an IATSE TTF course. If there is space available in the course, you will receive a confirmation email. Otherwise, you will be placed on the wait list. Walk-ins will not be admitted.

CENEDAL INFORMATION	
GENERAL INFORMATION	
DATE OF BIRTH	
(REQUIRED FOR ELIGIBILITY VERIFICATION)	
LAST NAME FIRST NAME	MIDDLE NAME
Street	Home Phone
ADDRESS	(INCLUDE AREA CODE)
CITY STATE ZIP CODE	Work Phone
	(INCLUDE AREA CODE)
EMAIL ADDRESS	CELL PHONE
(Required Field)	(INCLUDE AREA CODE)
JOB INFORMATION	
PRIMARY	SECONDARY
JOB CLASSIFICATION:	JOB CLASSIFICATION:
UNION REPRESENTATION O Yes O No	IATSE LOCAL #:
CERTIFICATION	
I certify that all of the information on this form is true and complete to the best of my knowledge. If asked, I agree to provide substantiation of the	
information that I have given on this form. I agree that the IATSE Training Trust may share my name and contact information with my local union,	
employer and the instructor, school, educational vendor or training institution in order to verify my eligibility and enrollment status. Any photographs	
taken at this course with my image may be used in IATSE and IATSE TTF materials.	
APPLICANT	DATE OF
Signature	APPLICATION
FOR IATSE TTF OFFICE USE ONLY	
○ ELIGIBLE ○ DATABASE ○ CONFIRMED ○ WAITLIST ○ TTF CARD ○ OSHA CARD	

Please fill out the entire application (all fields). Blank fields delay processing. Return applications via email, fax, or mail to the IATSE Training Trust Fund at: