TOOLBOX TALKS ATTENDANCE REGISTER

CFS
completefixing.com

TBT Subject:	

Talk Given By:		Position:	Site Manager/Supervisor
Date:		Site/Project:	
Duration:	30 Minutes		

By signing below, you are confirming:

- ✓ I have attended the above titled toolbox talk
- ✓ I understand my own responsibility for health and safety
- ✓ I will work in a common endeavour to help maintain a safe working environment for all CFS personnel, contractors and any persons who may be affected by our work activities

PLEASE WRITE IN BLOCK CAPITAL AND ENSURE ALL WRITING IS CLEARLY LEGIBLE

#	First Name	Surname	Signature
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Evidence of completed TBTs must be shared with the CFS H&S Team:

mwalcott@completefixing.com & lmartin@completefixing.com