Safety Talk:			_	
Presented by:	Date	e of meeting:		
Meeting start time:	Mee	eting end time:		
Health and safety issues discussed				
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•				
•				
•				
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•				
Review procedures & workplan				
Worker comments / feedback:				





Safety Talk:	Saicty laik.
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To be signed by all employees, contract workers, clients and others who participated in the safety talk prior to commencing work.

Who Attended:				
PRINT NAME	SIGNATURE			



