



Application for Chapter Membership Holmes Safety Association

Mail: U.S. Department of Labor
Mine Safety & Health Administration
Joseph A. Holmes Safety Association
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Arlington, VA 22209-3939

Internet: zzMSHA-HolmesSA@dol.gov
Telephone: (202) 693-9574
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Application is hereby made for admission to the Holmes Safety Association. It is understood that this organization will be designated as a Chapter.

Chapter name will be (to be chosen by the organization) _____

_____ Safety Chapter. It will be located at

_____ (organization) _____ (town) _____ (county) _____ (state)

Desired start-up date is _____

Chapter meetings will normally be held _____ of each month.

Membership size will be (number of employees) _____

Type of operation: Underground Surface Mine
 Mill Contractor Other _____

If applicable: Mine Number _____ Contractor Number _____

Describe the product or service of the organization _____

Chapter Representative (Please print or type name and address)

Name and title: _____

Organization Name: _____

Organization Address: _____

Organization Phone No.: _____ Fax No.: _____

Signature of Chapter Representative

We received assistance and/or information on how to apply for
Holmes Safety Membership from _____

To be completed by Holmes Safety Representative

A. Your request for membership is _____

B. Your assigned Chapter Number is _____

Your membership is at no cost and entitles the Chapter to receive monthly Safety Bulletins containing information and articles that will aid in monthly safety meetings. Also, membership allows the Chapter to participate in area Council meetings. Your nearest Holmes Safety Council is _____

To contact the nearest Council official, call (name) _____

at (telephone number) _____.

Holmes Safety Representative