

# Registration form

**October 14–16, 2025**  
Ashland Hills Hotel & Suites • Ashland, Oregon

Please print

All parts of the registration form must be completed to process your registration.

Name: \_\_\_\_\_ Job title: \_\_\_\_\_

Company: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Ext.: \_\_\_\_\_ Alternate phone: \_\_\_\_\_

E-mail address (required): \_\_\_\_\_ (Must be unique e-mail address;

Is this the first time you have attended this conference? ☐ Yes ☐ No no duplicate e-mails)

Would you like to receive information about local ASSP meetings and membership? ☐ Yes ☐ No

## Part 1 – Registration fees (mark all that apply)

### Early-bird registration (prior to October 1, 2025):

☐ Professional Development Workshop ..... \$160

☐ First Aid, CPR, & AED Certification Course (8 a.m.-noon)..... \$70

### Conference (Wednesday and Thursday) October 15 & 16, 2026

☐ Full conference, Wednesday and Thursday..... \$220

☐ One day, Wednesday..... \$130

☐ One day, Thursday..... \$130

### Registration (after September 30, 2025):

☐ Professional Development Workshop ..... \$190

☐ First Aid, CPR, & AED Certification Course (8 a.m.-noon)..... \$70

### Conference (Wednesday and Thursday) October 15 & 16, 2025

☐ Full conference, Wednesday and Thursday..... \$270

☐ One day, Wednesday..... \$155

☐ One day, Thursday..... \$155

**TOTAL ENCLOSED \$** \_\_\_\_\_

**Payment (check or credit card information) must accompany registration form.**

Scan/email form to  
[oregon.conferences@oregon.gov](mailto:oregon.conferences@oregon.gov) or mail to:

**ASSP – SOUTHERN OREGON CHAPTER**  
PO Box 5640  
Salem, OR 97304-0640  
Fax: 503-947-7019

**For Pre-registration, return by October 7, 2025.**

Some sessions may close; call for session availability  
503-947-7411.

### Questions?

Call the Conference Section at **503-947-7411** or  
**888-292-5247** (toll-free), **option 1.**

**Federal Tax ID Number: 93-1127638**

**If paying by credit card, please fill out the information below.**

**Charge my:** ☐ MasterCard ☐ VISA ☐ American Express ☐ Discover

**Name on card (print):** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Exp. date:** \_\_\_\_\_ **Security code:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

## Office use only

**Date Rec.** \_\_\_\_\_

**Amt. Rec.** \_\_\_\_\_

**Check #** \_\_\_\_\_

**PO #** \_\_\_\_\_

**Last 4** \_\_\_\_\_

{ 3 digits on back of MasterCard or VISA  
4 digits on front of American Express

(Continued on other side)

**Credit Card #:**

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For your protection, your credit card number will be shredded after processing.

Registrant's name: \_\_\_\_\_

Attendee profile: (check one) ☐ Employee ☐ Management ☐ Owner ☐ Consultant ☐ Other/not listed: \_\_\_\_\_

Are you a safety committee member? ☐ Yes ☐ No

Please indicate the number of employees at your worksite: ☐ 20 employees or fewer ☐ 21 to 50 employees ☐ 51 or more employees

Indicate which industry you represent: (check one)

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Agriculture                   | <input type="checkbox"/> Government/Public Administration | <input type="checkbox"/> Utilities                  |
| <input type="checkbox"/> Construction                  | <input type="checkbox"/> Healthcare                       | <input type="checkbox"/> Warehousing                |
| <input type="checkbox"/> Food Processing/Manufacturing | <input type="checkbox"/> Human Services                   | <input type="checkbox"/> Wood Product Manufacturing |
| <input type="checkbox"/> Forest Activities/Logging     | <input type="checkbox"/> Manufacturing                    | <input type="checkbox"/> Other/not listed: _____    |
|  | <input type="checkbox"/> Transportation                   |   |

How did you learn about the conference? (check all that apply)

- |   |  |
|---|--|
| <input type="checkbox"/> ASSP Southern Oregon Chapter | <input type="checkbox"/> Industry association        |
| <input type="checkbox"/> Oregon OSHA                  | <input type="checkbox"/> Insurance carrier           |
| <input type="checkbox"/> SHRM                         | <input type="checkbox"/> Labor association           |
| <input type="checkbox"/> Direct mail flyer/program    | <input type="checkbox"/> Management/employer         |
| <input type="checkbox"/> Co-worker                    | <input type="checkbox"/> Public service announcement |
|   | <input type="checkbox"/> Other/not listed: _____     |

## Part 2 – Session Selection (Choose only one first and one second choice for each time period.)

For each time period, circle the ① next to the session you would most like to attend.

Also circle the ② next to the session that is your second choice for that time period.

Example: ① 2 Example class A  
1 2 Example class B  
1 ② Example class C

## Tuesday, October 14

### 8 a.m.-noon

- ☐ First Aid, CPR, & AED Certification Course  
(Optional: Infant/child CPR from 1-2 p.m.)

### 9 a.m.-3 p.m.

- ☐ Professional Development Workshop

## Wednesday, October 15

8-9:45 a.m.

Welcome and Keynote

- ☐ Yes, I want to attend the Welcome and Keynote: Stronger Together: Building Resilient Teams for Safety Professionals

10:30 a.m.-noon

SESSION 1

- |   |   |   |
|---|---|---|
| 1 | 2 | Respiratory Protection — How Do I Make This Work?   |
| 1 | 2 | The Influence and Culture Relationship  |
| 1 | 2 | Safety Committee Roles and Responsibilities   |
| 1 | 2 | The Power of People: Influence, Persuasion, and Impact in Leadership                                      |
| 1 | 2 | Boom Goes the Stigma: Addressing Suicide, Mental Health, and Substance Abuse in the Construction Industry |

1:15-2:45 p.m.

SESSION 2

- |   |   |  |
|---|---|--|
| 1 | 2 | Discussing Our Culture: The Intersection Between Physical and Psychological Safety |
| 1 | 2 | Safety Training for Employees  |
| 1 | 2 | Basic Hazard Identification  |
| 1 | 2 | How Employers Can Prepare for ICE Audits and Inspections                           |
| 1 | 2 | Contract Management: Dealing with Multiemployer Worksites                          |

3:30-5 p.m.

SESSION 3

- |   |   |  |
|---|---|--|
| 1 | 2 | Civility at Work: A Safety Imperative and Culture Catalyst |
| 1 | 2 | Employee Concentration: What Were You Thinking?!           |
| 1 | 2 | Preventing Serious Injuries and Fatalities                 |
| 1 | 2 | Total Worker Health® Awareness for Safety Committees       |

### 5-6:30 p.m.

- ☐ Yes, I will attend the Networking Event  
(no cost; limited seating – capacity 60)

## Thursday, October 16

8-10 a.m.

General Session

- ☐ Yes, I will attend the Awards Presentation and Keynote: You Get More Flies With Honey: The Importance of Recognition

10:30 a.m.-noon

SESSION 4

- |   |   |   |
|---|---|---|
| 1 | 2 | 2025 Employment Law Update                            |
| 1 | 2 | Hydration and Nutrition in the Industrial Workforce   |
| 1 | 2 | Incident Investigation                                |
| 1 | 2 | Risk Assessments: Choosing the Right Control Measures |
| 1 | 2 | Recordkeeping and Recording                           |

1-2:30 p.m.

SESSION 5

- |   |   |   |
|---|---|---|
| 1 | 2 | Practical Strategies for Enhancing Your Safety Culture          |
| 1 | 2 | Back on the Case: Advanced HR and Safety Investigation Training |
| 1 | 2 | Cultivating Safety Leadership at Every Level                    |
| 1 | 2 | Let's HAZCOM-municate About Chemical Safety                     |
| 1 | 2 | Confined Spaces   |

2:50-4:20 p.m.

SESSION 6

- |   |   |  |
|---|---|--|
| 1 | 2 | Who's Minding the Store? Perspectives from Emergency Management                          |
| 1 | 2 | From Conflict to Collaboration: Building Psychological Safety for High-Performing Teams  |
| 1 | 2 | I See Hurt People: The Sixth Sense of Hazard Awareness and Mitigation                    |
| 1 | 2 | Ergonomics Pitfalls and Possibilities: How to Spot and Solve Ergonomics Problems at Work |
| 1 | 2 | Fall Protection in Wood-Framed Construction  |

### Special accommodations:

- ☐ Check if you require special services. Provide a written description of your needs.