

Woodchips Woodworking Club Training Record

Instructor: _____

Training Class/Cluster _____ Date _____

PLEASE READ THE STATEMENT AND SIGN BELOW

I acknowledge I have been instructed on the safe and proper use of the tools and/or machines included in this training, and fully understand they are potentially dangerous pieces of equipment. I further understand that my misuse may result in an injury to myself and I accept responsibility for following all the safety guidelines regarding the use of the tools and/or machines in this training. I hold harmless Sun City Anthem and the Woodchips Woodworking Club for any and all injuries as a result of failing to properly adhere to these rules.

PRINT NAME

SIGN NAME

_____	_____
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INSTRUCTOR'S SIGNATURE: _____

NOTE: Please place completed forms in the database administrator's in-box.