**Bega A.P.& H.** WHS 01

**General Induction for Volunteers**

1. You are required to understand a range of Environment & Safety matters. (See attachment (WHS 04) Environment & Safety Requirements)
2. As part of your responsibility you must complete a specific induction process with a Show Committee representative for any particular area you are assigned to.
3. As part of your responsibility you must go through the general induction resource for all ‘workers’ under using the Induction Sheet below. “Workers” are defined as volunteers, commercial stall holders and workers, sideshow/guild staff participating in the FSC Bega Show

**Induction Process**

1. Welcome
2. The Societies’ Risk Management Policy and where to access a copy. (At Show Secretary’s Office)
3. Inform the workers where the following are located:

(refer site map showing Medical – Evacuation – Emergency Plan)

Toilets

Secretary’s Office

First Aid kit – (in Secretary’s Office)

First Aid Officer (under broadcast office at arena)

Accident reporting procedure – see attachment WHS 02

1. Ensure the following have been understood:

Reporting procedures for Accidents and First Aid. (attachment WHS 02) immediate reporting to secretary’s office and completion of report form.

Emergency procedures – including site evacuation – (see attachment WHS 06)

Site specific hazards. Each site, exhibit, entertainment will have their own inherent hazards.

Safe work practices. Each site, exhibit, entertainment will have their own safe work methods which will be explained to you.

If entering the Ring all non-committee members must sign an Indemnity Form (WHS 05) acknowledging the risks of being in the ring.

1. Before workers undertake any work, you must ensure you are competent and capable to carry out required work i.e. heavy lifting, etc.
2. Ensure you are wearing the appropriate PPE gear (sun safe, safe footwear, etc.)required.
3. Sign this sheet to acknowledge that you have participated in the induction.

Name of Area / Sideshow / Stall induction is for ……………General Induction

Person undertaking induction: Name ……………………………………………………………………………....

Date………/…………/……… Sign …………………………………………………………………………………..