

DATE

NAME

COMPANY

WHOM VISITING

SIGNATURE (See below)

TIME IN

# VISITOR

**THIS PASS MUST BE WORN AT ALL TIMES.  
WHILE ON THE PREMISES**

**PLEASE RETURN TO RECEPTION AND  
SIGN OUT BEFORE LEAVING THE PREMISES.**

PASS No. 100001

## IMPORTANT NOTICE TO ALL VISITORS

Your signature above indicates understanding of the following conditions of entry into the premises:

### HEALTH & SAFETY

Your safety is important to us. Please remain in the company of the person you are visiting. You have a responsibility to care for your own and others health and safety.

### EMERGENCY PROCEDURES

In the event of an emergency, leave the building by the nearest safe exit and report to the evacuation point as directed.

### INCIDENTS & ACCIDENTS

Any incident or accident whilst on the premises must be reported immediately.

### SMOKING

Smoking is not permitted anywhere on the premises.