



Workplace Safety Agreement

1. Introduction

This Workplace Safety Agreement outlines the responsibilities and commitments of both Bobby Jones Links ("the Company") and its team members to maintain a safe and healthy work environment.

2. Team Member Commitment

As a Team Member of Bobby Jones Links, I agree to:

- Adhere to all safety policies and procedures as outlined by **the Company**.
- Immediately report any unsafe conditions or hazards to my supervisor.
- Participate in all required safety training sessions.
- Act responsibly and refrain from engaging in any behavior that could put myself or others at risk.
- Use all provided safety equipment and personal protective equipment (PPE) as required.
 - Team members may be required to provide fitted personal protective equipment (PPE) when working in designated positions or within a department. (steel-toe footwear, slip-resistant footwear, prescription eye protection)
- Undergo any necessary medical treatment for a work-related injury or illness as coordinated by a claims adjuster through a managed care arrangement. Treatment received outside the Worker's Compensation managed care arrangement is not compensable unless authorized by the carrier prior to the treatment date.

3. Company Commitment

Bobby Jones Links commits to:

- Provide a safe work environment that complies with all relevant health and safety laws and regulations.
- Regularly inspect and maintain all equipment and work areas to ensure they are safe.
- Provide all team members with the necessary safety equipment and Personal Protective Equipment (PPE) as required.
- Conduct regular safety training and education programs.
- Investigate any accidents or incidents promptly and thoroughly.
- Report all work-related injuries to our worker's compensation carrier unless the team member refuses medical treatment. A refusal of treatment must be signed by the team member in cases where treatment is refused.

4. Reporting and Addressing Hazards

- Team members must report accidents, injuries, or hazards to their supervisor immediately.
- **The Company** will promptly investigate all reports and take necessary corrective action to eliminate the hazard.

5. Compliance

- Team members failing to comply with safety policies and procedures may face disciplinary action, up to and including termination.
- **The Company** will regularly review and update safety policies to ensure ongoing compliance with all regulations and best practices.

6. Acknowledgment

By signing this agreement, I acknowledge that I have read, understood, and agree to comply with all the terms and conditions outlined in this Workplace Safety Agreement.

Team Member Name: [Your Name]

Date: [Month, Day, Year]