**WELCOME**

**PLEASE READ OUR CONDITIONS OF ENTRY CAREFULLY BEFORE ENTERING THIS SITE.**

**Conditions of Entry to this Site**

**Health and Safety**

In accordance with the Health and Safety at Work Act 2015 and Client Name’s Health and Safety Management Programme, Visitors must obey all reasonable instructions and signs whilst on site to ensure that their actions create no hazards to people or property. Your site host will brief you on our specific health and safety requirements in the areas you are visiting. Please acquaint yourself with the Evacuation Point, COVID-19 requirements, and site hazards/risks (available at reception) before progressing.

**COVID-19:**

* Keep to physical distancing requirements (2m), use the hand sanitiser and cough into your elbow. Please report if you are feeling unwell before entry to our business.
* Wear a face covering
* You agree to QR Code or complete the register to confirm your visit for tracing purposes.

**Contractors:** All Contractors/Suppliers must receive a Site Induction before commencing work (if they have not received one before).

**Fire and Emergency:** On hearing the alarm, please leave the site immediately by the nearest Fire Exit. Your Assembly Point is in the [insert meeting place and street name here]. Please report to the Fire Warden and remain there until the ‘all clear’ is given.

**Assistance Required:** If you require assistance, please indicate this to the Staff Representative at the sign in point, they will allocate a Staff Member to help you and assist you while you visit our facility.

**Smoking:** Smoking is prohibited on site except in the designated area.

**Signature:** Your signature on the Client Name Visitor Register acknowledges your acceptance and understanding of our conditions of entry and our site-specific hazards/risks.

**ENJOY YOUR VISIT**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **DATE** | **NAME** | **TIME IN** | **TIME OUT** | **PERSON VISITING** | **MOBILE No.** | **EMAIL ADDRESS** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| **DATE** | **NAME** | **TIME IN** | **TIME OUT** | **PERSON VISITING** | **MOBILE No.** | **EMAIL ADDRESS** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |