

2025 Employee Safety Training

Orland, CA

Harvest Safety Training

Topics include: Harvest Implement Safety (Harvesters, Shakers, Rakers, Sweepers, Nut Buggies), Tractor/PTO, PPE, Caught and Crushed, Heat Illness Prevention, Fire Prevention and Extinguisher Use, Lifting & Back Safety, Slips, Trips, and Falls, Nightwork & Fatigue

Workplace Violence Prevention

California Senate Bill (SB) 553, which was enacted on September 30, 2023, mandates employers to create and sustain a Workplace Violence Prevention plan and provide annual employee training.

Tuesday, August 5, 2025

Location: Glenn County Farm Bureau - 831 5th Street Orland, CA

English: 9:00 a.m.-12:00 p.m.

Spanish: 12:30 p.m.-3:30 p.m.

Cost: \$75 per person.

Space is limited, **pre-registration is required by 07/30/2025**. Contact us at (530) 665-4422 or lcrafft@mvpsafety.org for questions about the training events.

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Complete the form below, mail with check payable to **MVP Safety, 201 East Street, Woodland, CA 95776**. Or call our office at (530) 665-4422 to make a payment over the phone with a credit card. **Our ability to cover our costs for this training depends on attendance, therefore we are not able to provide refunds once registrations have been received. We can however provide you with credit toward future safety courses within the same year.**

Company: _____ Contact Person: _____

Phone: _____ Email: _____
(include area code)

Mailing Address: _____ City: _____ State/Zip: _____

Please indicate how many employees will attend each session:

Glenn County Farm Bureau - 831 5th Street Orland, CA 95963 August 5, 2025- Harvest Safety & WPVP

9:00 a.m.-12:00 p.m. English _____ @ \$75 each = \$ _____

12:30 p.m.-3:30 p.m. Spanish _____ @ \$75 each = \$ _____

Total: \$ _____

Names of Employees (Please circle E for English or Spanish Sessions):

E / S _____ E / S _____
E / S _____ E / S _____
E / S _____ E / S _____

For office use only Visa MasterCard American Express Cash Check _____ Payment Applied Confirmation Reminder

CC# _____ Exp. _____ / _____ CID _____ Zip Code _____ Invoice # _____

