

Safety Poster Order Form



Fax: (717) 741-3130
Phone: (800) 233-1957

Mail To:
VFIS
Supply Department
P.O. Box 2726 • York, PA 17405

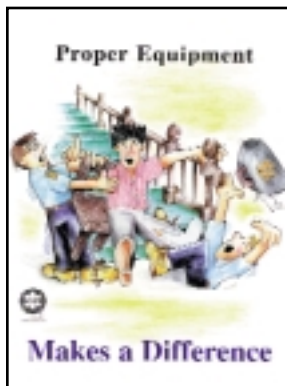
Organization name:			Date:		
Attention:			VFIS policy no.:		
Address:			Name your policy is insured in:		
(Please use street address, not P.O. Box)			Agent's Name:		
City:	State:	Zip:	Agency name:		
Telephone: ()			Telephone: ()		

Price: One complimentary set of posters to VFIS insureds.
(Additional posters may be purchased at \$1 per poster.)
Non-insureds cost is \$2.50 per poster.

Total Quantity	Unit Cost	Total Amount



“Volunteer”
Item: C10:056
Quantity _____



“Proper Equipment”
Item: C10:054
Quantity _____



“Following Distance”
Item: C10:122
Quantity _____



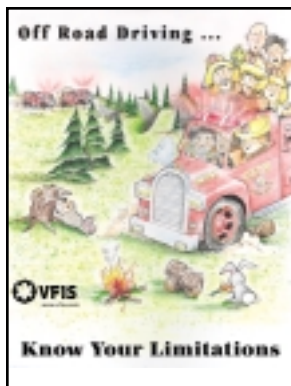
“Bloodborne Pathogens”
Item: C10:097
Quantity _____



“Complete Stop - Fire”
Item: C10:093
Quantity _____



“Driving POV's”
Item: C10:092
Quantity _____



“Off Road Driving”
Item: C10:059
Quantity _____



“Is the Scene Safe?”
Item: C10:088
Quantity _____



“Complete Stop - EMS”
Item: C10:091
Quantity _____



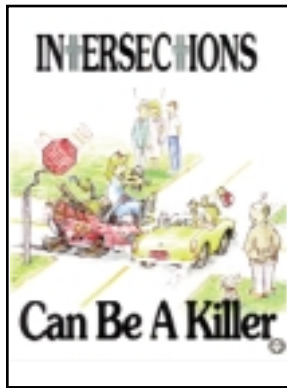
“Limitations”
Item: C10:053
Quantity _____



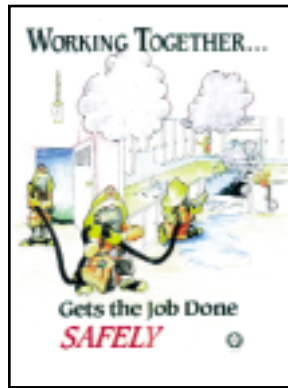
“Preventive Maintenance”
Item: C10:121
Quantity _____



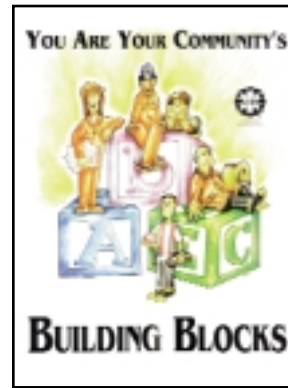
"Circle for Safety"
Item: C10:098
Quantity _____



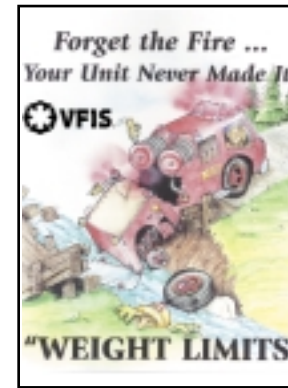
"Intersections"
Item: C10:033
Quantity _____



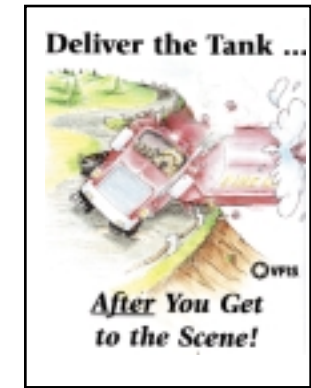
"Working Together"
Item: C10:034
Quantity _____



"Building Blocks"
Item: C10:055
Quantity _____



"Weight Limits"
Item: C10:060
Quantity _____



"Deliver the Tank"
Item: C10:052
Quantity _____



"Seat Belts"
Item: C10:035
Quantity _____



"Staying in Shape"
Item: C10:029
Quantity _____



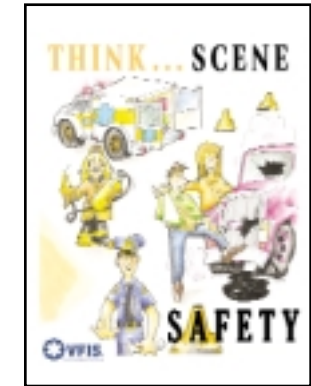
"Rollovers"
Item: C10:058
Quantity _____



"Use a Spotter"
Item: C10:036
Quantity _____



"Complete Stop"
Item: C10:090
Quantity _____



"Scene Safety"
Item: C10:089
Quantity _____