



GBCA Silica Safety Program Request for Participation Form

Organization Name

Please complete and print this form.

Email completed form to:

**Frank Durso, Director, Safety Services, GBCA,
FDurso@gbca.com**

Today's date

GBCA Member Company Name

Member Company Contact Person

Contact Person's Email

Contact Person's Telephone Number

GBCA Member Company Address

Please complete and print this form.

Email completed form to:

**Frank Durso, Director, Safety Services, GBCA,
FDurso@gbca.com**

By submitting this Request for Participation in the GBCA Silica Safety Program, the GBCA Member Company acknowledges and agrees that its participation is purely voluntary and for the sole benefit of the GBCA Member, and that it hereby unconditionally waives and releases the GBCA, its employees, committees and Board members from any and all liability arising out of or related to the equipment or services provided under the GBCA Silica Safety Program."