



UNITED SUPPORT & MEMORIAL FOR WORKPLACE FATALITIES

2837 Yellowstone PKWY Lexington, KY 40517

Phone: (859) 338-9144 Fax (859) 266-5646 Email: tammy@usmwf.org

GOING TO WORK SHOULDN'T BE A GRAVE MISTAKE!

All personal information is confidential and will only be given if you chose to be involved. This survey will be used to determine where we will focus our efforts and how we can better serve the families.

Name:
Address:
Phone:
Email
How did you hear about USMWF and what do you think about the organization?

Please check the appropriate box

Question	Scale of Importance		
	Yes	No	Other
Are you active in workplace safety and/or family rights?			
If you answered yes, would you like USMWF to help in your endeavor?			
If you answered no would you like to be and what issue?			
House and Senate Hearings			
Creating new bills			
Supporting bills			
Media Outlets			
Contacting other families			
Creating agendas			
Grant writing			
Meet and great (giving families support)			
Sponsorship (enabling a volunteer to attend hearing or event in families efforts)			
Writing/editing documents			
Research			



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Contacting other organizations in support			
Working with the site/blog/newsletter			
Share your account in flyer/document/bill			
Speaking			
Would you like to be contacted if any or your desired fields are requested?			
If yes could you please give include the following information?			

Full name and age of your loved one.

Workplace of incident. (If contracted please include both)

Was the place of employment Government and is there OSHA coverage in your area?

- Link/ insert/or small written account of your loss and any other relevant information. You are also welcome to add your own page with the survey.
- If you would like to add comments, suggestions or have a special interest please fill free to do so below.

Thank you for your time and patience. We know this is not an easy task but your answers will be put to good use.