Be Safe. Be Profitable!

The Agricultural Safety and Health Council of America (ASHCA) is a not-for-profit organization founded in 2007 with a mission to proactively address ongoing and emerging occupational safety and health issues affecting U.S. agriculture. With this mission we aim to drive an increase in agricultural safety and health awareness, efficiency, productivity and sustainability.

ASHCA is a coalition of more than 100 organizations, businesses, federal agencies and safety professionals all seeking to improve the health and safety of farmers, ranchers and agricultural workers.

Agriculture, due to its decentralized nature and diverse structure, lags behind other industries in reducing the toll on its workers. Its fatality rate is eight times that of the all-industry average. In a typical year, 551 workers die while doing farm work and about 88,000 suffer lost-time injuries.

Annual Partner Donation Levels:

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<th>Platinum Partner</th>
<th>Gold Partner</th>
<th>Silver Partner</th>
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<td>$15,000+</td>
<td>$10,000</td>
<td>$5,000</td>
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With your help, Partnership funds will be used to improve safety culture and behavior among agricultural workers of all types by supporting a series of workshops and trainings such as:

- Subsidizing ASHCA’s National Agricultural Safety Summit
  2024 – 1 two-day Safety Summit
  2025 – 1 two-day Summit

- Funding topic-specific workshops bringing researchers and industry together to identify industry needs and create safety and health solutions:
  2023 – 2 one-day Safety Topic Workshops
  2024 – 1 one-day Safety Topic Workshop
  2025 – 2 one-day Safety Topic Workshops
Partnership Program

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- Advancing ASHCA’s AgSHARP® safety training program’s reach and materials.
- Supporting a full-time staff position to assist ASHCA members in executing projects.
- Promoting ASHCA membership.
- Updating ASHCA’s website to become the preferred online website for agricultural operations including:
  - Ability for industry to submit requests for safety and/or health research for their operations.
  - Tabs with quick links by industry segments and their safety resources such as: Row Crops, Animals, Logging, Ag Equipment, Fruits & Nuts, University Programs, Statistics, and so forth.
  - Information and Links to agricultural safety webinars and conferences.
  - Tabs or links to all agricultural safety organizations and their materials.
  - Tabs or links to universities and their agricultural departments and safety training videos.
  - Access to research results, searchable by topic or industry.
  - And so much more!

In return for your annual support, ASHCA will post your organization’s name and logo on our website and list you as a sponsor for ASHCA programs. Partners are also entitled to access all material catalogs and provide key guidance and feedback as it relates to the organization’s deliverables.

Please consider joining us in this great cause as a platinum partner. Your company and customers will greatly benefit from these services for years to come. In addition, your annual donation includes a membership to ASHCA.

If you’re interested in becoming an ASHCA Partner, feel free to contact us for more details.

Julie Koochagian: julie@ashca.org
Partnership Donation Form

Partner Information:

Company Name ____________________________________________________________

Address _______________________________________________________________________________________

City / State / Zip ________________________________________________________________

Contact Name _________________________________________________________________

Phone __________________________ Email __________________________________________

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Partner Donation Level: ☐ Silver ☐ Gold ☐ Platinum ☐ Other $______________

Method of Payment:

If paying by check, make check payable to ASHCA (Agricultural Safety and Health Council of America). Please fill out form and email to info@ashca.org, or mail to ASHCA, P.O. Box 2506, Leesburg, VA 20177.

☐ Check enclosed ☐ Please email an invoice ☐ Credit card

If paying by credit card, all fields below are required:

Card Number ________________________________________________________________

Expiration Date __________________________ 3-digit Security Code (required) ____________

Cardholder Name (print) __________________________ Cardholder Phone ________________

Billing Address (if different than above) ____________________________________________

City / State / Zip ________________________________________________________________

Cardholder Signature __________________________________________________________________

If you’re interested in becoming a Partner, feel free to contact us for more details. 
Julie Koochagian: julie@ashca.org