

Name: _____

Date: _____

HEALTH AND SAFETY

T N J N H O U S E K E E P I N G C
T R I P P I N G H A Z A R D I Z U
G G M T A I Y J N T U O E S U G A
M D G E F V E W Y G Q A D H S I M
J O V F I C L O V J L X S A A C M
C S D V R N L R U N V U I R F E C
S B A K E X O K Z L A H G P E M M
H E E W H U W S K B Z B N O T B T
A E N N A S S H R F Z L S B Y Y O
Z P O H Z Z I O O U M U Z J H M O
A L A W A A G P C Y I E Q E A X L
R P P E R B N U B G H S A C Z O S
D V G H D S S H U P R I W T A Q C
E A P H G R E E N S I G N S R H J
S A F E T Y S I G N S N E M D J F
H C M M Z R M F L K V S S Y O X Z
M H H E S A F E L I F T I N G G J

TRIPPING HAZARD
SAFE LIFTING
SAFETY SIGNS
BLUE SIGNS
HAZARD

SHARP OBJECTS
YELLOW SIGNS
GREEN SIGNS
RED SIGNS
TOOLS

SAFETY HAZARD
HOUSEKEEPING
FIRE HAZARD
WORKSHOP
PPE