Guest Log Book

**Welcome to National Ambulance**

All guests /visitors are required to register in the Guest log book in Receptionist/ Security Guard while visiting the National Ambulance Office/station/warehouse. National Ambulance is ISO 45001 Occupational health and safety Certified Please take the chance to look at the Evacuation Map & Emergency Exits which are displayed & distributed on the wall in your location around the office/station/warehouse. In the event of an emergency please proceed to the exit door & follow signs or guidelines for fire wardens/ Security Guard to assembly point.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Visitor’s Name** | **Company** | **Mobile Number** | **Purpose/Person to Visit** | **Time In** | **Time Out** | **Signature** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

Guest Log Book

**Welcome to National Ambulance**All guests /visitors are required to provide their ID to the Receptionist while visiting the Head Office.   
National Ambulance is 45001 OHSAS certified in Health & Safety Please take the chance to look at the Evacuation Map & Emergency Exits which are displayed on the wall inside the front door, and at the other location around the office In the event of an evacuation please proceed to the identified assembly point.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Visitor’s Name** | **Company** | **Mobile Number** | **Purpose/Person to Visit** | **Time In** | **Time Out** | **Signature** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

Guest Log Book

**Welcome to National Ambulance**All guests /visitors are required to provide their ID to the Receptionist while visiting the Head Office.   
National Ambulance is 45001 OHSAS certified in Health & Safety Please take the chance to look at the Evacuation Map & Emergency Exits which are displayed on the wall inside the front door, and at the other location around the office In the event of an evacuation please proceed to the identified assembly point.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Visitor’s Name** | **Company** | **Mobile Number** | **Purpose/Person to Visit** | **Time In** | **Time Out** | **Signature** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

Guest Log Book

**Welcome to National Ambulance**All guests /visitors are required to provide their ID to the Receptionist while visiting the Head Office.   
National Ambulance is 45001 OHSAS certified in Health & Safety Please take the chance to look at the Evacuation Map & Emergency Exits which are displayed on the wall inside the front door, and at the other location around the office In the event of an evacuation please proceed to the identified assembly point.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Visitor’s Name** | **Company** | **Mobile Number** | **Purpose/Person to Visit** | **Time In** | **Time Out** | **Signature** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

Guest Log Book

**Welcome to National Ambulance**All guests /visitors are required to provide their ID to the Receptionist while visiting the Head Office.   
National Ambulance is 45001 OHSAS certified in Health & Safety Please take the chance to look at the Evacuation Map & Emergency Exits which are displayed on the wall inside the front door, and at the other location around the office In the event of an evacuation please proceed to the identified assembly point.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Visitor’s Name** | **Company** | **Mobile Number** | **Purpose/Person to Visit** | **Time In** | **Time Out** | **Signature** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |