

# Event Risk Assessment Form

Applies to : BUILD UP    EVENT DAYS    BREAKDOWN (please circle)

Risk Assessment Conducted by : .....  
(Block capitals)

**Signature** : ..... Date .../... /2016

<b>Activity/Task : (EXAMPLES)</b>	<b>Hazard : (EXAMPLES)</b>	<b>Persons at Risk</b>	<b>Risk Ranking</b>	<b>Controls Current / Controls Required :</b>
Working at height Construction or complex stand building Machinery demos Moving vehicles Use of powered tools Lifting operations Use of Chemicals Audience participation Etc.	Falls Structural collapse Being run over Cuts, entanglement Heavy loads dropping Burns, Spillages Etc.	General public Venue staff Your staff Other company's staff Contractors	Severity x Likelihood Refer to the Risk Matrix <b>(Please circle one)</b>	In this column List the existing control measures in place which ensure safety. If additional controls are required to reduce the risk then list the additional precautions in this column. For further help refer to the HSE "5 Steps To Risk Assessment" For Guidance.
			HIGH or MEDIUM or LOW	

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**Please make a photocopy of this sheet for additional activities**

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