|  |  |
| --- | --- |
| Activity / Event Title: |  |
| Activity / Event Date: |  |
| Person in Charge: |  | Others attending: |  |
| Date of Assessment: |  | Assessment by: |  |
|  |  |  |  |  |  |  |  |  |  |
| Summary of Event (inc. place, dates, transport, numbers, age range, etc.): | Impact: 5 - Major, 4 - Significant, 3 - Considerable, 2 - Moderate & 1 - Minor |
| Likelihood: 5 - Very Likely, 4 - Likely, 3 - Possible, 2 - Unlikely & 1 - Very Unlikely |
|  |  |  |  |   |   |   |   |   |   |
| **ID** | **Risk** | **Consequences**  | **Impact** | **Likeli-hood** | **Inherent Risk** | **Risk Reduction Measures** | **% Risk Reduction** | **Residual Risk**  | **Person Responsible** |
| 1 |   |   |   |   |  |   |  |  |   |
| 2 |   |   |   |   |  |   |  |  |   |
| 3 |   |   |   |   |  |   |  |  |   |
| 4 |   |   |   |   |  |   |  |  |   |
| 5 |   |   |   |   |  |   |  |  |   |
| 6 |   |   |   |   |  |   |  |  |   |
|  |  |  |  |  |  |  |  |  |  |
| **Key Actions to be taken:** |  |  |  |  |  |  |  |
|  |  |
| **How, to whom and when will this risk assessment be communicated:** |
|  |  |