

|                                      |                                     |           |         |
|--------------------------------------|-------------------------------------|-----------|---------|
| Group Name                           | Group Address                       |           |         |
| Risk Assessment for (event)          |                                     |           |         |
| At                                   |                                     |           |         |
| On (date)                            | Postcode                            | Telephone |         |
| Site assessment undertaken by (sig.) | Assessor's name (printed)           |           | Page of |
| On (date) / /                        | Assessor's contact telephone number |           |         |

**First**

**Second**

**Third**

| Hazard No. | List significant hazards here: | List groups of people who are at risk from the significant hazards you have identified: | List intended controls |
|------------|--------------------------------|---|------------------------|
|            |                                |   |                        |
|            |                                |   |                        |
|            |                                |   |                        |