### Event Planning & Risk Management Form

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| **PROGRAMME OR EVENT INFORMATION** | |
| **Activity:** | **Date/Time:** |
| **Ministry / Group:** | **Key Leaders Name(s)** |
| **Location:** | **Number of Leaders Needed:**   * Leaders police checked * Leaders Safety Trained   **Trained First Aiders:** |
|
| **Goal of Event:** |
| **Activity Description:** | |

Colour Key

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| **PRE PLANNING** | **EVENT & POST EVENT PLANNING** | **PLANNED FOLLOWUP** |

#### Pre Planning

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| **VENUE** | **TIMINGS** | **COST** |
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| **PROMOTION & COMMUNICATION WITH PARENTS AND STUDENTS** | **WHO / IF APPLICABLE** |
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| **PREPARATION** | **RESOURCES NEEDED** | **WHO / IF APPLICABLE** |
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#### Event

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| **ACTIVITY** | | | **RESOURCES NEEDED** | | **WHO / IF APPLICABLE** |
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| **RISKS** Describe potential hazards/risks | **RISKS** Low/Medium/High | **PREVENTION** How will you a try to ensure the risk doesn’t happen? | | **EMERGENCY PLAN** What will you do if it happens | |
| People | Allergies |  | |  | |
| Equipment |  |  | |  | |
| Environment |  |  | |  | |

**REPLICATE THIS PAGE FOR EACH ACTIVITY IN THE EVENT AND COMBINE TO CREATE PLAN FOR ENTIRE EVENT**

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| **PLANNED FOLLOW UP** | **WHO / IF APPLICABLE** |
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| **Form Filled In By:** | **Signed Off By:** |
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