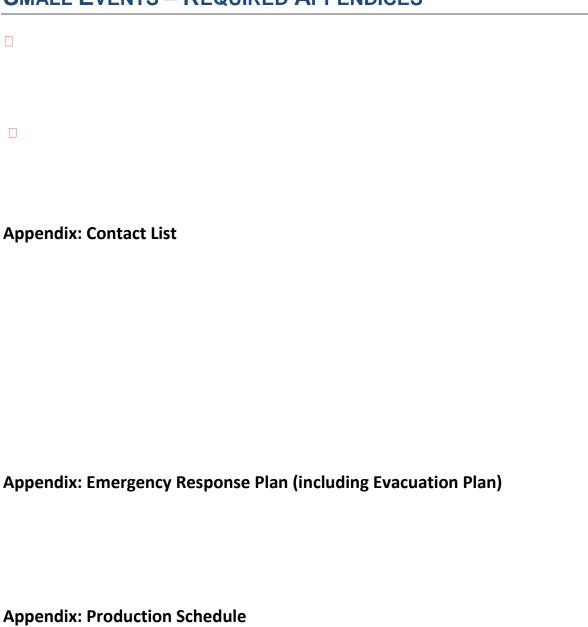
# **EVENT HEALTH & SAFETY PLAN**

Event: Kids Fest			
Location:			
Event Date:			
Rain Date:			
Event Times:			
Production Period:			
Event Lead Organiser:			
Event Overview:			
Event Company(s)	Role	Site/ Event Day	Contact
Event Company(s)	Kole	Key Contact	Number
Plan prepared by:			
Signed (on completion):			Date:
Approved by:			
Signed (on completion):			Date:
Forwarded to:			Date:
Event Permit Issued:	HPRM No:		

## **EVENT SYNOPSIS**

EVENT DESCRIPTION
Outline Schedule
AUDIENCE
EVENT MANAGEMENT
Event Management is as follows:
SPECIAL CONSIDERATIONS

## SMALL EVENTS - REQUIRED APPENDICES



#### GENERAL SITE RISK ASSESSMENT

HAZARD – eg:	PERSONS AT RISK	Risk	CONTROL MEASURES	Residual Risk	Persons Responsible	Required
Falling objects						
Equipment & infrastructure						
Fire						
Ground Conditions						
Tripping / Slipping						
Uneven surfaces						
Sharp objects						
Food poisoning						
Overcrowding						
Medical						

HAZARD – eg:	PERSONS AT RISK	Risk	CONTROL MEASURES	Residual Risk	Persons Responsible	Required
Traffic						
Car Parking						
Cables & Leads						

#### PEOPLE & CHILDREN RISK ASSESSMENT

HAZARD – eg:	PERSONS AT RISK	Risk	CONTROL MEASURES	Residual Risk	ACTION BY	Required
Lost child						
Children climbing on equipment						
Minor Injuries / Accidents						
Major injuries / Accidents						

### WEATHER / NATURAL DISASTER RISK ASSESSMENT

HAZARD – eg:	PERSONS AT RISK	Risk	CONTROL MEASURES	Residual Risk	ACTION BY	Required
Rain or snow						
Wind						
Earthquake						
Low temperatures						
Sun stroke						
Darkness						