

RISK ASSESSMENT AND MANAGEMENT PLAN

(Event Organisers are not obligated to use this Template – you may submit your own)

EVENT NAME		EVENT DATES	
EVENT LOCATION	Central Coast Regional Sporting & Recreation Complex		
ASSESSMENT COMPLETED BY	NAME (PRINT)	SIGNATURE	ASSISTED BY (NAME)

TASK / ISSUE	HAZARD	ASSESSMENT			RISK MITIGATION	RESPONSIBLE PERSON	NEW ASSESSMENT
		IMPACT	LIKELIHOOD	LEVEL OF RISK			