

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)		SIGNATURE

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

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Add pages as deemed necessary for your submission.