 **WVCA RISK ASSESSMENT**

**INSIDE HALL EVENTS**

**Nature of event:**

**Date of event:**

|  |  |  |
| --- | --- | --- |
| **Activity** | **Potential risk / injury** | **Measures to address risk (avoid / minimise** |
| **General** | Fire / emergency | * Explanation of fire exits will be given
* Where appropriate a list of attendees
* Mobile phone will be used to summon emergency services
 |
| **Will tables / chairs have to be moved?** |  |   |
| **Wet floors (slip hazard)** |  |  |
| **Will specialist electrical equipment be used (e.g. projector; screen; special lighting)** |  |  |
| **Will the kitchen be used?**(spillages; hot beverages; cooker; dishwasher; cupboards) |  |  |
| **Will the upstairs hall be used?**(access for those with mobility issues) |  |  |
| **Will the event be attended by children / young people or persons with special needs?**(safeguarding measures) |  |  |
| **Will the event be regular and will it involve children / young people / vulnerable adults?** |  | If yes – appropriate safeguarding policies and procedures exist.Signed (organiser):Date: |

**Person completing assessment**

Name: Signature: Date:

**WVCA Secretary or Hall Manager**

Signature: Date: