**FUNDRAISING EVENT RISK ASSESSMENT FORM**

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| EVENT NAME | | DATE OF EVENT |
|  | |  |
| EVENT PURPOSE |  | |
| EVENT LOCATION |  | |

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| **ACTIVITY** | **RISK / HAZARD** | **PERSON(S) AT RISK** | **RISK LEVEL**  H, M, L | **CONTROL MEASURES** | **OWNER** | **COMPLETION DATE** |
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| ASSESSMENT COMPLETED BY | SIGNATURE | DATE | ASSESSMENT REVIEWED BY | SIGNATURE | DATE |
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