

RISK ASSESSMENT

Exhibition / Event name:		Exhibitor / Stand name:	
Location & Task:		Stand number:	
Assessed by:		Date Assessed:	
Relevant standards:			
Review date:	Month/year or sooner if there are reasons to believe the assessment is no longer valid or there are significant changes in the matters to which it relates		
Scope of Risk assessment:			
Number and description of employees involved in the activities covered by this assessment:			

Task	Hazard	Persons at Risk	Existing measures to control risk	Risk Rating	Additional control measures required
Signed:				Date:	

Ongoing monitoring/management required:

Action plan				
Activity/premises element/Issue	Further action required	Action by Whom	Action by When	Initials and date completed