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| **Activity:** | **Location:** |
| **Activity dates: (one off event or continual/week day)** | **Who is at risk? (e.g., staff, volunteers, yp)** |
| **Activity Leader** ……………..…………..…………..**Role:**……………….………………..............**Date:**……..…………**Approved by**…………………………………………**Role:** …………………………………………**Date:** ……………… | **Review Date:**…………..… |

**Risk Assessment**

| **Hazard**  | **Risk***(what could happen?)* | **Rating****(Low, Medium, High,)** | **Preventative measures and additional action required (action by whom and completion date)** |
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