

# Adventure activity risk assessment

## SJF 25



This form to be completed prior to the event

RISK ASSESSMENT RECORD								
Date of assessment:			Assessor:			Ref no:		
EVENT TITLE:								
DATE(S):								
1	2	3	4	5	6	7	8	9
Hazard (who may be harmed)	Existing controls	Hazard 1-2-3 *	Likelihood 1-2-3*	Risk Col 3 X Col 4	Additional controls	Date actioned	Date completed	Review & signed

\* Rating: High = 3; Medium = 2; Low = 1

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