 **xx Group**

**Activity Risk Assessment – sign on sheet**

Date: xxx

Activity: Walk fire trail xx hours.

Description: Meet at xxx

Leader: xx - phone

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| **Risk** | **Mitigation action** |
| Unfamiliar conditions | * Conducted trial walk on xxxxx to test conditions. |
| Slips, trips, and falls. | * Advise wet conditions and small rocks can be slippery. Be careful. * Advise water on track, that may be deep in parts. Avoid. |
| Insect and animal bites | * Wear PPE (long pants, sleeves, hat) * Carry first aid kit (leader) |
| Sun effects and dehydration | * Advise attendees to bring water and hat * Wear PPE (long pants, sleeves, hat) * No public toilets are available |
| Exhaustion | * Advise to walk at own pace, speak out if the group is walking too fast. |
| COVID-related | * Attendees to Print Name and sign also add phone of an emergency contact number. * Conduct activity outdoors and maintain social distancing |

After mitigation, risks are assessed as Likelihood = Possible and Severity = Minor (treated with first aid).

**Attendees**

Attendees agree to behave safely and follow any safety-related instructions.

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| **Print Name** | **Sign** | **Phone number** | **Emergency contact number** |
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| **Print Name** | **Sign** | **Phone number** | **Emergency name & number** |
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