

Event guidance checklist

Checklist for Stages 1 - 3

Introduction

To ensure that you have fully considered and acted upon all the issues raised in stages 1 – 3 of this form (Pre-planning; Organising the event; Final preparation) tick them off below. An **action** column has been provided to allow you to monitor progress. Space has been given at the foot of each stage to allow for brief notes.

Stage 1 Pre-planning

	Done	To do	By when	By whom
Where _____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
When _____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Who _____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
What _____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Specialist equipment _____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Code of Practice _____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Welfare arrangements _____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Special permission _____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Insurance _____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Timescale _____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

Notes:

Stage 2 – Organising the event

	Done	To do	By when	By whom
Establish a committee	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Liaison	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Site plans	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Temporary structures	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Catering	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Stewards	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Crowd control	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Numbers attending	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Provision for the disabled	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Security	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
On-site traffic	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Off-site traffic	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Transportation	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Contractors	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Performers	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Facilities and Utilities	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Contingency plans	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Clearing up	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Risk assessments and separate fire risk assessments	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
• Premises License	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
• PRS/PPL	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

Notes

Stage 3 – Final preparations

	Done	To do	By when	By whom
Routes	<input type="checkbox"/>	<input type="checkbox"/>		
Inspection	<input type="checkbox"/>	<input type="checkbox"/>		
Siting	<input type="checkbox"/>	<input type="checkbox"/>		
Signage	<input type="checkbox"/>	<input type="checkbox"/>		
Vehicles	<input type="checkbox"/>	<input type="checkbox"/>		
Structures	<input type="checkbox"/>	<input type="checkbox"/>		
Lighting	<input type="checkbox"/>	<input type="checkbox"/>		
Public address	<input type="checkbox"/>	<input type="checkbox"/>		
Briefing	<input type="checkbox"/>	<input type="checkbox"/>		
Accidents	<input type="checkbox"/>	<input type="checkbox"/>		
Pre-site meeting arranged	<input type="checkbox"/>	<input type="checkbox"/>		

Notes

[illegible]