

Event Management Plan

Prepared By

Event Management Plan Event Details Name of Event: **Event Brief:** Describe what is the actual event Address of Event: Types of Audience: Intended Audience: Aim (Insert the purpose of the event) Site Site Type: Capacity of Site: Built Infrastructure / Facilities: (What is already there) Infrastructure / Facilities: **Date and Times** Event Date/s: **Event Times:** Bump- in: **Required Set Up Times** Bump-Out: Required Times to Reset to Original Condition: **Event Manager** Event Manager: Telephone:

Email:										
Committee Members, Roles & Responsibilities										
Name Role Responsibility Number Email										
Ivallie	Kole	Responsibility	Number	Elliali						
Stakeholders Contact List										
Stakeholders Co	ntact List									
Stakeholders Col	ntact List Contact Name	Contact Details	Interest							
		Contact Details	Interest							
		Contact Details	Interest							
		Contact Details	Interest							
		Contact Details	Interest							
		Contact Details	Interest							
		Contact Details	Interest							
		Contact Details	Interest							
		Contact Details	Interest							
		Contact Details	Interest							

Budget	Budget									
Income										
Category	Description	Qty	Item cost	Total	Notes					
Total										

Expenses					
Category	Description	Qty	ltem cost	Total	Notes
Total					
Total					
Profit / Loss					



Action Plan Category **Description** Who **Due Date**

Communication Pl List how you plan to con	an nmunicate with stakeholders of the event.
Before:	
During:	
After:	
Marketing & Prom	otion
Discuss the type of marl	keting and promotion you plan to do:
Promotional Material	
Magazines & Newsletters	
Website	
Socials	
Email	
Sponsors List potential sponsors a	and what will be sponsored.
Sponsor	What will be sponsored
I .	

Operations	
Insurance	
Public Liability Insurance	
Name of Insurer:	
Policy Number:	
Value:	
Volunteer Insurance	
For events held on Council I a minimum indemnity of \$2	and or facilities event organisers must have Public Liability Insurance with 20 million.
Risks	
Risk Assessment	
Risk Management Plan	
Traffic Management	
Traffic Management Company Details	
Traffic Control Plans	
Transport Management Plan	
Risk Assessment	
Does your insurance list Fe interested parties.	deration Council, NSW Roads and Maritime Services and NSW Police as

Security and Crowd Control
Security Plan
Pedestrian Management
First Aid
First Aid Provider
First Aid Station
Lost Children
Amenities and Services
Entry and Egress Details
Emergency Services Entry and Egress Points
ighting
Water
Power and Gas
Foilets / Family Room
Built structures
Lost Children
Signage
Telephones Telephones
Waste Management
Parking
Accessibility Plan
Food and Beverage
iquor Outlets
Liquor Plan

Liquor License

Responsible Service

Food Outlets	
Food Safety Plan	
List of Food Vendors	
Insurance	
Food & Beverage Stallholder Entry and Egress Points	
Fireworks	
Work Safe NSW Approval	
Copy of Pyrotechnic Security Clearance and Explosive License	
Risk Assessment	
Insurance	
Fire Ban Exemption	
Market Stalls	
Stallholder Form	
List of Stall Holders	
Insurance	
Stallholder Entry and Egress Points	
Amusement Devices	
Amusement Device Approval Form	
Risk Assessment	
Insurance	

Program / Run Sheet

Date	Action	Responsibility

Site Plan		
Include a site plan of your event		



Risk Assessment

	RISK	Ident	ifica	tioi	n and Risk Control	Work	shee	τ
FEDERATION	Event/Activity:							
COUNCIL	Event Date:							
	Date of Assessment:							
	Undertaken by:							
Please refer to the OHS Risk	Calculator located on ti	he back	page	to as	scertain the Risk Rating. T	he Risk	Rating	s are to b
. Todou rojer to tilo olio ilion								
_			_		from the area concerned.			
_			vant s		from the area concerned. Risk Control Measures	Risk R	ating	
agr	reed to in consultation w	vith rele	vant s			Risk R How Severe?	ating How Likely?	Risk
Identified Hazards	reed to in consultation w	Risk R	vant s	taff	Risk Control Measures	How	How	Risk
Identified Hazards	reed to in consultation w	Risk R	vant s	taff	Risk Control Measures	How	How	Risk
Identified Hazards	reed to in consultation w	Risk R	vant s	taff	Risk Control Measures	How	How	Risk
Identified Hazards	reed to in consultation w	Risk R	vant s	taff	Risk Control Measures	How	How	Risk

CONSULTATION

All those who took part in the risk assessment process should sign this form.

Name	lame		Name		Name		Name		Name	
Sign		Sign		Sign		Sign		Sign		
Date		Date		Date		Date		Date		
Risk Id	entification Authorizati	on: To be	completed by Events Off	icer		1	1	ı		
I, worksh	neet and:		have reviewed this risk	identific	ation and risk control					
Concui	with the assessment ar	d contro	ls and approve this risk a	ssessmer	nt:					
YES	NO									
Reque	st further information re	garding	the assessment / controls	::						
YES	NO									
Confir	irm that a Work Method Statement (WMS) has been developed:									
YES	NO (Reference N	o.)								
Additio	onal	Comments:								
Signat	rure:				Date: / /					

LIKELIHOOD		RISK RANKING MATRIX								
HIGH	5	10	15	20	25					
SIGNIFICANT	4	8	12	16	20					
MODERATE	3	3 6 6 12								
LOW	2	4	6	8	10					
NEGLIGIBLE	1	2	3	4	5					
CONSEQUENCE	NEGLIGIBLE	LOW	MODERATE	MAJOR	CATASTROPHIC					
LIKELIHOOD DEFINITION	NS		I							
A high likelihood	It is expected to occur	ccur in most circums	stances		-					
	There is a strong li	kelihood of the haza	ards reoccurring							
A significan t likelihood	Similar hazards ha	ve been recorded o	n a regular basis							
	Considered that it	is likely that the haz	ard could occur							
A moderate likelihood	Incidents or hazard	ds have occurred inf	requently in the past							
A low likelihood	Very few known in	cidents of occurren	ce							
	Has not occurred y	et, but it could occu	ur sometime							
A negligible likelihood	No known or recor	rded incidents of oc	currence		_					
	Remote chance, m	ay only occur in exc	eptional circumstance	e						
CONSEQUENCE DEFINIT	IONS									
Catastrophic	Multiple or single d									
	 Costs to event of up 									
	International and na									
Major	Serious health impa									
	 Costs to event betw 	Costs to event between \$2.5 and \$5 million								
		National media outrage								
Moderate	More than 10 days rehabilitation required for injured persons									

	Costs to event between \$200,000 and \$2.5 million			
	Local media and community concern			
Low	Injury to person resulting in lost time and claims			
	• Costs to event between \$50,000 and \$200,000			
	Minor isolated concerns raised by stakeholders, customers			
Negligible	Persons requiring first aid			
	Costs to event up to \$50,000			
	Minimum impact to reputation			



EMERGENCY MANAGEMENT PLAN										
Event Name			Event date & time							
Event location										
Name of event's Emergency Services Contact										
Organisation			Contact mobile							
People involved in		Date								
PREPARATION										
ACTION				WHO			WHEN			
RESPONSE (never put yourself at risk)										
ACTION							WHO			
CORRESPONDENCE WITH EMERGENCY SERVICES										
		_								