**Reading Athletic Club Risk Assessment**

**Risk Assessment Name:** Click or tap here to enter text.

**Document & Version No:** RA\_Click or tap here to enter text..Click or tap here to enter text.

**Initial Date:**  Click or tap to enter a date.

**Initial Reviewer** Click or tap here to enter text.

**Review period (in years):** Click or tap here to enter text.

**Last Review Date:** Click or tap to enter a date.

**Last Reviewed by:** Click or tap here to enter text.

**Type of Risk Assessment** Choose an item.

**Are there fire hazards?** Choose an item.

**Are there electrical hazards?** Choose an item.

**Are there chemical hazards?** Choose an item.

**Should the stadium control some of the risk?** Choose an item.

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| --- | --- | --- | --- | --- | --- | --- |
| **Hazards** | **Potential Harm** | **Inherent Risk Level** | **Existing Controls** | **Existing Risk Level** | **Additional Controls Advised** | **Target Risk Level** |
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## Assumptions

Click here to use this space to record any assumptions made in this risk assessment

## Rationale

Click here to use this space to record any rationale for the decisions or judgements made in this risk assessment

## Action Plan

Click here to use this space to record the action plan for this risk assessment with sufficient details such as dates and responsibilities

## Issues

Click here to use this space to record any ongoing issues that relate to this risk assessment