

**IN AN EMERGENCY DIAL #000
FOR POLICE, AMBULANCE OR FIRE SERVICES**

+ EVENT DETAILS FOR EMERGENCY SERVICES +

EVENT TITLE:

EVENT DURATION:

LOCATION NAME:

LOCATION ADDRESS:

PRIMARY EMERGENCY ASSEMBLY POINT:

FIRST AID LOCATION:

TOTAL NUMBER OF EVENT PEOPLE:

PRIMARY EMERGENCY CONTACT:

PRIMARY EMERGENCY CONTACT PHONE:

SECONDARY EMERGENCY CONTACT:

SECONDARY EMERGENCY CONTACT PHONE:

+ EMERGENCY CONTACT INFORMATION +

SERVICE	CONTACT PHONE

EMERGENCY SERVICE NOTES:

+ EVACUATION PROCEDURES +

PRIMARY EMERGENCY ASSEMBLY POINT:

PRIMARY EVACUATION PROCEDURE:

SECONDARY EMERGENCY ASSEMBLY POINT:

SECONDARY EVACUATION PROCEDURE:

EVACUATION MANAGER NAME:

CONTACT PHONE:

RESPONSIBILITY

EVACUATION ASSISTANT NAME:

CONTACT PHONE:

RESPONSIBILITY:

EVACUATION NOTES:

+ FIRST AID PROCEDURES +

FIRST AID LOCATION:

FIRST AID PROVIDER:

CONTACT PHONE:

AVAILABLE FIRST AID RESOURCES:

+ CHILD SAFE PROCEDURES +

CHILD SAFE LOCATION:

PRIMARY CHILD SAFE SUPERVISOR:

PRIMARY CHILD SAFE SUPERVISOR - CONTACT PHONE:

SECONDARY CHILD SAFE SUPERVISOR:

SECONDARY CHILD SAFE SUPERVISOR - CONTACT PHONE:

CHILD SAFE PROCEDURE: