Venue Risk Assessment Checklist

	WELWYN/HATI	IELD US	BA		
Inter	est Group				
Date Lo		ocation/Postcode			
Desc	ription of Activity				
Desc	inputori of Activity				
Hazard		Yes	No	N/A	Comments
1	Is the access suitable for the group attending the	1			
	activity especially anybody with limited mobility?				
2	Is wheelchair access adequate?	1			
3	Is the area free from obstructions & trip hazards?	1			
4	Are there adequate means of escape in an				
	emergency?				
5	Are there appropriate direction signs to aid				
	escape?				
6	Is there a Fire Alarm?				
7	Is there Emergency Lighting?				
8	Is there a designated assembly point? Where is it?				
9	Is there an emergency procedure for the building?				
	Do you have a copy?				
10	Is seating always laid out?				
	Is it a U3A responsibility before and after the				
	activity to lay out seating				
11	Is there a kitchen?				
	Is the kitchen adequate and hygienic?				
	Are food safe cleaning materials available?				
	Has the kettle been visually safety checked?				
12	Are the toilet facilities adequate & accessible?				
13	Is equipment being brought to the venue?				
	Has it been checked?				
14	Is there a First Aid box and if so where is it				
	located?				
15	Does it have a sound system? Has the associated				
	equipment, ie microphone been cleaned?				
16	Other (define)				
A 1 1:	tional information:				· · · · · · · · · · · · · · · · · · ·

Signed: Position: Date: