**Orchestra Society**

**Safety Statement**

**For NUIG**

**Societies**

**05/11/19**

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# Orchestra Society Health & Safety Policy

This Safety Statement and included risk assessments cover Orchestra Society’s specific safety issues. It represents our commitment to provide for the health and safety of everyone affected by our activities.

Our objective is to reduce the likelihood of injury through a proactive approach to risk management. This approach will be to a level that complies with the law and current best practice in our activities. All members are required to follow this code. A failure to do so could result in legal or disciplinary action.

# Orchestra Society Code of Practice

For every event organised by Orchestra Society, an appointed member of the Society will:

* Obtain a list of participating student names and I.D. numbers
* When going on a trip, obtain a list of member’s next of kin, their home address, and home contact number.
* Obtain list of any medical conditions /injuries
* Ensure in the event of members receiving medical treatment, that the members are 100% satisfied that the have received all the medical treatment they require.
* Ensure members are fit to participate
* Ensure members understand the inherent risks of the activities involved and that any participation is at their own risk
* Understand level of compliance and any previous experience with the activity – giving novices adequate instruction.
* Inform participants of the necessity to follow directions from instructors at all times.
* Ensure all members are aware of the Safety Statement and are familiar with its contents.

Signed: Date:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Auditor, Orchestra Society

# Orchestra Society Auditor Responsibilities

**The Orchestra Society Auditor will:**

* Ensure that everyone is familiar with the Safety Statement,
* Ensure there are first aiders and first aid equipment available if required,
* Ensure that trip leaders are suitably experienced,
* Ensure that novices are well looked after
* Ensure that relevant training is provided where necessary,
* Ensure that everyone is aware of the action to be taken in an emergency.
* Ensure that in the event of members receiving medical treatment, that the members are 100% satisfied that the have received all the medical treatment they require.

Signed: Date:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Auditor, Orchestra Society

# Orchestra Society Members’ Responsibilities

**Orchestra Society Members:**

* Will be aware of the hazards involved for each event
* Must not jeopardize their own health & safety or that of others
* Must follow instructions given by officers or trip leaders
* Must attend training provided for them
* Must inform officers/trip leaders of any medical condition that may affect their ability to participate in activities or affect emergency first aid treatment.
* Are responsible for making an informed decision as to whether it is a suitable activity for them.
* If consuming alcohol, must drink responsibly, and in a manner, which will not endanger their own safety and health or that of others.
* Must never participate in activities while under the influence of alcohol.

**A list of Orchestra Society members who attended the Safety Meeting, at which these responsibilities were agreed upon, follows. (A Safety Meeting is a meeting of the Society at which the Safety Statement is read, discussed and amended if necessary.)**

**List of Orchestra Society members who attended safety meeting**

**Date of Safety Meeting: 05/11/19**

**I have read and fully understand the members’ responsibilities set out in the previous section by the Orchestra Society.**

**I agree to fully comply with those rules.**

**Signed below-**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **ID Number** | **Phone No** | **Signature** |
| Casey Cowan | 17360043 | 0863961088 |  |
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# Orchestra Society Event Risk Matrix

The following matrix(es) assess the typical events and activities of Orchestra Society.

A matrix is completed for each type of event typically organised by Orchestra Society. The event is given a score for each line that applies to it, and the score is totalled at the end.

If any event or activity has a total score of more than 20, is it judged to have inherent risks that you will need to take specific steps to reduce.

The measures to reduce the risk will inform your list of guidelines for the organisers and the rules/ terms and conditions for your attendees.

-------------------------------------------------------------------------------------------------------------

**Activity /Event Name and Description:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| **Factor** | **Details** | **Value** | **Score** |
| Event Nature | VIP Visits | 1 |  |
| Classical / Folk / Theatrical Performance | 1 |  |
| Athletics and Sport | 1 |  |
| Fetes / Fund Raisers | 1 |  |
| Pop / Rock / Dance events | 2 |  |
| Parades and Carnivals | 2 |  |
| Fireworks Display | 2 |  |
| Aviation Sport and Display | 3 |  |
| Motor Sport and Display | 3 |  |
| Marine / Waterway Events | 3 |  |
| Celebrations and Parties | 3 |  |
| Travel to third world countries | 4 |  |
| Travel to local venue | 1 |  |
| Travel to national venues | 2 |  |
| Travel abroad | 3 |  |
| Convention | 2 |  |
| Film showing | 1 |  |
| Conference | 1 |  |
| Talks in schools | 1 |  |
| Electronics workshops | 2 |  |
| Fashion Show | 2 |  |
| Build a rocket | 5 |  |
| Cookery | 3 |  |
| On campus workshops | 1 |  |
| Unsupervised workshops (no teachers) | 2 |  |
| Construction workshops | 2 |  |
| Going to Inter-Collegiate events  | 2 |  |
| Skydiving | 5 |  |
| Workshops with people with intellectual disability | 2 |  |
| Event Venue | Indoor | 1 |  |
| Arena / Stadium | 2 |  |
| Outdoor, defined boundaries | 3 |  |
| Outdoor, Widespread / street | 4 |  |
| Pool with lifeguard | 2 |  |
| pool without Lifeguard | 4 |  |
| Forest | 3 |  |
| River/Lake/sea daytime | 3 |  |
| River/lake/sea night-time | 6 |  |
| Mountain  | 4 |  |
| Numbers | <500 | 1 |  |
| 500 – 1,000 | 2 |  |
| 1,000 – 3,000 | 3 |  |
| 3,000 – 4,000 | 4 |  |
| 5,000 – 10,000 | 5 |  |
| >10,000 plus | 10 |  |
| Participant accommodation | All seated | 1 |  |
| Mixed (at least 50% seated) | 2 |  |
| Standing | 3 |  |
| Participant age and profile | Full mix, in family groups | 1 |  |
| Full mix, not in family groups | 2 |  |
| Predominately adults | 3 |  |
| Predominately children and young persons | 4 |  |
| Predominately elderly | 4 |  |
| Conflict / Rival factions | 5 |  |
| Registered students (over 16 not necessarily over 18) | 3 |  |
| Registered students (over 18) | 3 |  |
| Additional Factors | Adverse weather potential | 2 |  |
| Queuing over one hour | 1 |  |
| Parking on site | 1 |  |
| Livestock | 1 |  |
| Temporary structures | 2 |  |
| Bouncy castles / sideshow | 2 |  |
| Onsite catering | 2 |  |
| Overnight camping | 3 |  |
| Traffic movement in crowd area | 3 |  |
| Helicopter operations | 4 |  |
| Dangerous goods storage and use | 4 |  |
| Funfair rides | 4 |  |
| Alcohol available | 5 |  |
| Free Standing tech equipment | 3 |  |
| Distance from major A & E facility | Under 5 miles | 1 |  |
| 5 – 10 miles | 2 |  |
| Over 10 miles | 3 |  |
| Distance from fire station | Under 3 miles | 1 |  |
| 3 -5 miles | 2 |  |
| Over 5 miles | 3 |  |
|  |  | **Total** |  |

# Orchestra Society Risk Assessment Forms for Typical Events

**Orchestra SOCIETY RISK ASSESSMENT FORM**

Activity /Event Description: ..........................................................................................................................................................

Date of Activity/Event: ……………………...… Duration of Activity/Event: …………………..…..…… Number of Participants: ………………

**Risk Factor Calculation – Calculate the Risk Factor for each identified Hazard, below.**

|  |  |  |
| --- | --- | --- |
| **Severity of Injury (S) -**  | **Likelihood of Injury (L)** | **Risk Factor (R), R = S x L** |
| 1 Negligible - all in a day's work | 1 Improbable | <4 Risk may need to be controlled LOW  |
| 2 Minor - minor injury with short term effect | 2 Remote - unlikely | 4-6 Risk must be controlled MEDIUM |
| 3 Severe - major injury/disability (reportable) | 3 Possible - may or could well occur | 7-9 Hazard must be controlled HIGH |
| 4 Extreme - fatal | 4 Probable - expected to occur, several times | >9 Hazard must be avoided VERY HIGH |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Hazard Description | People at risk | Initial Risk Factor | Control Measures thatwill be put in place | ResidualRisk Factor | Further Action/Comments (Who will check the control measures?) |
| S  | L | R | S | L | R |
|  |  |  |  |  |  |  |  |  |  |
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(Extend this table as needed)

**Completed by:** ………………………………………….…… **Committee Position:** ……..…………………................ **Date:** ..……………..………………

**Send copies to**: Society Auditor, Societies Office

Example Risk Assessment Form Trip Away

**RISK ASSESSMENT FORM**

Society Orchestra Society

Event Trip to Doolin Date 18-20/10/19 Sheet 1 of 1

**Hazard Identification Reference (ID)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| (a) Confined Spaces | (b) Falls from Height | (c) Striking by mobile platform | (d) Trip or Slip | (e) Collapse | (f) Manual Handling | (g) Electrical | (h) Hazardous Substances | (i) Radiation | (j) Noise & Vibration | (k) Fire | (l) Explosion | (m) Others |

**Severity (S) Likelihood (L) Risk Factor (R) S x L= R**

|  |  |  |
| --- | --- | --- |
| 1 Negligible - all in a day's work | 1 Improbable | <4 Risk may need to be controlled LOW  |
| 2 Minor - minor injury with short term effect | 2 Remote - unlikely | 4-6 Risk must be controlled MEDIUM |
| 3 Severe - major injury/disability (reportable) | 3 Possible - may or could well occur | 7-9 Hazard must be controlled HIGH |
| 4 Extreme - fatal | 4 Probable - expected to occur, several times | >9 Hazard must be avoided VERY HIGH |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **ID** | **Hazard Description** | **People at risk** | **Initial Assessment** | **Control Measures** | **Residual** **Risk** | **Action/Comments** |
|  |  |  |  |  | **S**  | **L** | **R** |  |  |  | **S** | **L** | **R** |  |  |  |
| M | Road Collision | All Members  | 4 | 1 | 4 | Seat belts must be worn on the bus | 4 | 1 | 4 |  |  |  |
| F | Lifting heavy furniture in function room | All Members | 1 | 2 | 2 | Only lift if necessary | 1 | 1 | 1 |  |  |  |
| D  | Inadequate storage of personal belongings | All Members | 2 | 2 | 4 | Have designated area for instrument cases. Have members store their personal items in their rooms | 2 | 1 | 2 |  |  |  |
| F  | Lifting heavy instruments | Members with large instruments | 2 | 2 | 4 | Enquire about the weight of instruments and if they are possible to lift with minimal risk | 2 | 1 | 2 |  |  |  |
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Completed by Casey Cowan Date 17/10/19

Reviewed by ……………………………………………………………………. Review Date (s) …………………………………………………

# Orchestra Society Equipment Policy

Whilst OrchestraSociety equipment will remain the property of \_\_\_\_\_\_\_\_\_\_\_\_Societies, Orchestra Society is responsible for maintaining their equipment.

Orchestra Society will maintain the following records for all equipment:

* Place and date of purchase
* When it was used
* When safety checks were carried out
* Where repairs were carried out
* All safety and repair certification
* Storage locations for insurance and security purposes.

(See Appendix 3 – Society Equipment Policy and Blank Equipment Logs for the Societies Office’s preferred equipment log format.)

* A copy of all inventories and equipment records will be lodged with the Societies Office.
* In the event of an accident, these records will be required. Failure to produce such documentation may indicate a breach of the duty of care principle.
* Equipment records will be maintained and updated by the Society Equipment Officer, the Society Auditor or a designated member of the society.

# Appendix 1 - Advice on filling out the Societies Risk Assessment Form

1. Identify any hazards associated with your event/activity. A hazard is anything that might injure any person or harm their health. Describe each hazard in its own row in the “Hazard Description” column. (See Appendix 4 - Event Management Checklist for Risk Assessment, to help identify hazards.)
2. Decide who might be harmed, and how. Fill this into the “People at Risk” column.
3. Give the hazard a Severity score (S) of 1 to 4, depending on how severe an injury caused by it would be.
4. Give the hazard a Likelihood score (L) of 1 to 4, depending on how likely any injury is to happen
5. Multiply S and L to get R, the Risk Factor for that hazard.
* If R is less than 4, the risk is considered LOW, and the risk may need to be controlled (i.e. safety measures may need to be taken.)
* If R is between 4 and 6, the risk is considered MEDIUM, and the Risk must be controlled (i.e. safety measures must be taken.)
* If R is between 7 and 9, the risk is considered HIGH, and the Hazard must be controlled (i.e. the hazard itself must be made safer.)
* If R is greater than 9, the risk is considered VERY HIGH, and the Hazard must be avoided (i.e. the hazard must be removed entirely.)
1. List control measures that will be put in place to reduce the risk factor for each hazard.
2. Recalculate the Risk Factor for each hazard, once the control measures have been put in place. The residual risk factors for all hazards must be LOW – if not, further action is needed.

# Appendix 2 - Societies Fire Safety Policy

In the event of a fire:

1. Raise the alarm by operating the nearest fire alarm call point.

2. Call Security Ext. 3333 or the fire brigade using the 999/112 system. (On internal university phones dial 9 first to get an outside line.) Dial 122 on mobile phones.

3. Extinguish the fire only if possible and only if trained and it is safe to do so, using the equipment provided.

4. Do not take risks.

The continuous ringing of the fire alarm indicates a fire emergency in the area you are in - proceed as follows:

1. Evacuate the building by the nearest exit route and proceed to the nearest fire assembly point.

2. Close all doors after you. If time permits turn gas supplies and electrical equipment off but leave lights on.

3. Do not use lifts.

4. Do not re-enter the building.

The intermittent ringing of the fire alarm indicates a fire emergency in an adjacent area - proceed as follows:

1. Investigate the source of the alarm.

2. Do not take risks.

3. Do not use lifts.

4. Prepare to evacuate the building.

Take some time to familiarise yourself with the location of:

* + The fire exits.
	+ The fire alarm call point(s).
	+ The fire assembly point.

If you have any queries in this regard contact:

* Mr Gerry Murphy, Fire Prevention Officer, Block T, Distillery road, ext 2188
* Ms Alice Daly, Health and Safety Adviser, room A103 in the Quadrangle, ext 2678
* Mr Gerry Nolan, Head of Security, Security Office Distillery Rd, ext 2378 (General Security 2198/3333)

Safe Codes of Practice for society meetings and events:

* + Make a safety announcement at the beginning of all of your meetings or events and draw attention to safety exits.
	+ Ensure fire exits are free from obstruction.
	+ Ensure your committee members are familiar with the exits.
	+ In the event of an emergency ensure that everyone evacuates the building.
	+ Avoid overcrowding which could present a hazard in the case of an emergency.

# Appendix 3 – Society Equipment Policy and Blank Equipment Logs

Whilst equipment will remain the property of \_\_\_\_\_\_\_, All societies are responsible for maintaining their equipment. Societies must maintain the following records:

* Place and date of purchase
* When it was used
* When safety checks were carried out
* Where repairs were carried out
* All safety and repair certification
* Storage locations for insurance and security purposes.

In the event of an accident, these records will be required. Failure to produce such documentation may indicate a breach of the duty of care principle.

Equipment forms (see following example) are available to help societies ensure that equipment does not become a potential source of hazard.



**Societies Equipment Log Sheet**

|  |  |
| --- | --- |
| **Equipment type / Name** |  |
| **Serial Number** |  |
| **Date of Purchase** |  |
| **Cost** |  |
| **Use / function** |  |
| **Description of maintenance needed** |  |
| **Description of annual service needed** |  |
| **Authorised repairs agency** |  |
| **Expected life span** |  |
| **Instructions for use attached?** |  |
| **Normal storage location** |  |
| **Signed** |  |
| **Society and Committee Position** |  |
| **Date** |  |

# Appendix 4 - Event Management Checklist for Risk Assessment

This checklist should be used to up-date/develop a risk assessment for any major events. A copy of the risk assessment is to be sent to the Societies Office before commencement of the event.

Event:

Date:

Person(s) in charge of event:

Risk Assessment conducted by:

Please complete this checklist using the following replies in the first column:

* Done / In place
* Not Done
* N/A Not applicable

|  |
| --- |
| **Permanent Structure** |
|  | Do you have permission from the Buildings Office to use the facilities? |
|  | Is there adequate lighting, ventilation, heating and any other environmental conditions, which may affect people? (e.g. flat surfaces, ground level, emergency lighting, clear egress and appropriate humidity)? |
| **Temporary Structure** |
|  | Is there a temporary structure? |
|  | Do you have permission from the Buildings Office to erect the temporary structure? |
|  | Will competent persons erect it? Does it need a certificate of completion? |
|  | Is there adequate lighting, ventilation, heating and any other environmental conditions, which may affect people? (e.g. flat surfaces, ground level, emergency lighting, clear egress and appropriate humidity) |
| **Hygiene Facilities** |
|  | Are there an adequate number of toilets for the amount of people expected at the event? |
|  | Are there an adequate number of sinks and washing facilities? |
|  | Are they cleaned to a high standard? |
|  | Is there a system to ensure their function and cleanliness throughout the event? |
|  | Are there an adequate number of disabled toilets? |
| **Fire Safety** |
|  | Has the fire prevention officer inspected the location and approved it? |
|  | Clearly marked access and egress? |
|  | Clear passageways? |
|  | Working emergency exits? |
|  | Emergency lighting? |
|  | Fire extinguishers? Proper types available? |
|  | Fire blankets (if appropriate) |
|  | Functioning properly? |
|  | Personnel trained in the use of fire extinguishers? |
|  | Fire Marshals appointed? |
|  | Adequate smoke detection/fire monitoring and alarms? |
|  | Are there flammable liquids present? |
|  | Is there a generator for lighting that may cause a fire? |
|  | Is all equipment present in good working order and safe? |
| **First aid** |
|  | Adequate number of first aid kits? |
|  | First aid kits up to date and contains contents relevant to hazards that may be present at event (e.g. cooking food- burns) |
|  | Is there an appropriate amount of occupational first-aiders present? |
|  | Are there signs indicating the location of first aid kits? |
|  | If there is high risks, are measures in place e.g. first aid station |
| **Crowd Control** |
|  | Does the location facilitate the amount of people expected to be present? |
|  | Are all danger areas fenced off e.g. if event is near the river? |
|  | Are there an adequate number of stewards present? |
|  | Are they trained in event control? |
|  | Is there an adequate number of security personnel to prevent theft, fights etc.? |
|  | Is there traffic management? Parking arrangements? |
| **Special needs** |
|  | Is there access and egress for a disabled person? |
|  | Is there allowance made for children, elderly, pregnant women or others with special needs that may attend? (e.g. seating) |
|  |  |
| **Waste management** |
|  | Means of waste collection during setting up, during event and after? |
|  | What types of receptacles are to be used? |
|  | How and when will they be emptied and by whom? |
|  | Method for combating spills on the floor and to prevent tripping hazards? |
| **Communication and emergency response** |
|  | Is there appropriate and adequate number of safety signs present? |
|  | Is there a system for communicating with stewards, security, the crowd etc? |
|  | Is there a system for contacting emergency response teams?  |
|  | Do they have an easy access route? |
|  | Is there an emergency response plan? |
|  | Are staff aware of the chain of communication during such events? |
| **Others** |
|  | Are there ‘No Smoking’ signs? |
|  | Are there facilities approx. 6 metres away from the building for smokers? e.g. bins for cigarette butts. |
|  | If food is being served, is there a health code for preparation and service of the food? |
|  | Are there provisions for food allergies and also insect allergies, e.g. first aid kit to contain adrenaline/epinephrine? |
|  | Protocols in place - trained personnel to assist with severely-intoxicated individuals? |
|  | Protocols for accident and incident reporting that may occur at the event? |

**Priority Actions to be completed before the commencement of event:**

1.

2.

3.

4.

5.

6.

7.

8.

9.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Committee Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Appendix 5 – Societies Travel and Activities Policy and Sample Forms

From the perspective of health and safety, some activities, including trips, will be classified as a higher risk and therefore subject to more stringent planning. When going on trips, societies should:

* Appoint an event leader and safety officer for the trip. The safety officer should ensure the transport is insured and that the driver is competent and is not under the influence of alcohol. On arrival at the accommodation, the safety officer ensures that the group is aware of fire escapes and that all fire escapes are in working order.
* Depending on the nature of the trip, the committee should give some thought to any other procedures that need to be in place e.g. if safety equipment is needed, ensure that it has been checked and has been put on the bus; if members are socializing, that the group returns to the accommodation safely. Care should be taken near open water and if engaging in physical activity of a hazardous nature.
* Check the competency level and experience of participants before engaging in potentially hazardous activities which require training.

To facilitate activities, all clubs and societies are now required to complete an Activity/Trip Registration Form (see sample following), which lists all the people participating in the activity or trip. This form demonstrates that planning has gone into an activity and the necessary arrangements are in place made to meet health and safety criteria. On the Activity/Trip form you will be asked to fill in date and time of departure and expected return.

* There is also space for the names, student ID and a contact number for next of kin in case of emergency while on the trip.
* In addition there is space for those travelling to include any relevant medical information which may be vital while away from the university.

In addition, the safety officer should get the below Society Travel / Activity Form filled in at the start of the trip and then return it to the Societies’ Officer at the end of the trip with a brief report, stating that the trip was a success. This form is kept on file in the event of subsequent insurance claims. In the event of an accident please refer to Accident Response.

**Sample Activity/Trip Members’ Rules**

 **Society**

**Members’ Rules for Event \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Members are required to obey the following rules:**

* Be aware of the hazards involved
* Must not jeopardize your own health & safety or that of others
* Must follow instructions given by officers of trip leaders
* Must attend training provided
* Must inform officers/trip leaders of any medical condition that may affect your ability to participate in activities or affect emergency first aid treatment.
* You are responsible for making an informed decision as to whether it is a suitable activity for you.
* If consuming Alcohol you must drink responsibly, and in a manner which will not endanger your own safety and health or that of others.
* You must never participate in activities while under the influence of alcohol.
* Ensure in the event of receiving medical treatment, that you are 100% satisfied that you have received all the medical treatment you require before being discharged.
* Members must stay in groups of no less 3members and inform trip leaders of their daily itinerary; also you must check in with trip leaders at regular intervals throughout the day.

*Adjust these rules as appropriate after completing your risk assessment. Your members will be required to sign the rules at time of purchasing tickets for the trip at the SocsBox. Tickets will only be sold to students and staff of \_\_\_\_\_\_\_\_ who are members at the time of purchase.*

**Sample Society Activity/Trip Registration Form**

|  |  |
| --- | --- |
| **Society Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Trip Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Trip Dates: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Note: By signing up to this trip, you certify that you have read and fully understood the members rules set out by the society for this trip, and you agree to comply with these trip rules.** |
|  |  |  |
| **No.** | **Your Name (PRINT)** | **ID Number** | **Phone Number** | **Contact Name and Phone Number in case of Emergency**  | **Any Relevant Medical Condition?** | **SIGNATURE** |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
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| 10 |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |
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