

Event Details

Date _____ *Day* _____ *Month* _____ *Year* _____

Commencement Time _____

Location/Venue _____

Primary Contact Person _____

Phone _____ Mobile _____

Time			Action/Task	Responsibility
Start Time	Finish Time	Duration	Description of Task	List Who is Responsible

Additional Contact People and Contact Phone Numbers _____

Notes

Document Name	Version Number	Date of Issue	Review Date
RISK – Event Day Running Sheet	1.0.1	23 February 2023	Asrequired