



Student Event Risk Management Form

***This form must be submitted 10 days prior to your event
Forms not submitted 10 days prior to events may not be approved***

Please complete this and return it to the DSU Executive Office, Room 222 in the Student Union Building.

This Student Event Risk Management Form will be reviewed by the DSU Society Coordinator and the DSU General Manager to assess the level of risk associated with the event. If the level of risk is deemed to be acceptable, the Society Coordinator and General Manager will approve the event and place a copy of the form in your society file, and provide the Primary Event Organizer with a copy upon request. You will be notified immediately if there are any issues or questions surrounding your event. Use the Safety Protocol section to indicate how you plan to take precaution to reduce the risk of your event, particularly if your event involves alcohol, physical activity or travel. If you are required to take additional action steps before your event can be approved, you will be notified and must verify that these action steps have been taken before your event can be approved. You will be notified of the outcome of the risk assessment on your event via email, once a decision has been made.

Events that are not approved cannot be carried out under any circumstances

Please remember to complete all four sections of this form as well as a (separate) Primary Event Organizer Contract.

Part A – Society Contact Information

Part C – Risk

Part B – Notice of Event Information

Part D – Primary Event Organizer Contract (separate form)

Incomplete forms will not be processed.

Questions regarding the Risk Management process can be directed to the DSU Society Coordinator, or the DSU General Manager:

Society Coordinator

(902) 494-1106

society.coordinator@dal.ca

General Manager

(902) 494-1248

craig.kennedy@dal.ca

PART A – Society Contact Information

Name of Society: _____

Please note: Only ratified societies will have their events approved

1. Contact Name: _____

Email: _____

Phone: _____

2. Contact Name: _____

Email: _____

Phone: _____

PART B – Notice of Event Information

Title of Event: _____

PEO: _____ Contact # during event: _____

Date: _____ Expected # of participants: _____

Start time of event: _____ End time of event: _____

Location of event: _____

Description of event: _____

Safety protocols: _____

PART C – Risk

The purpose of PART C is to:

- ⇒ Identify hazards and associated risks;
- ⇒ Examine risk management techniques – either to prevent losses from happening, or if unavoidable, to reduce the frequency or severity;
- ⇒ Select and implement techniques such as exposure avoidance, monitoring and improving the event as needed
- ⇒ Protect both the participant and the organizers

Section I ALCOHOL INVOLVED? Yes ☐ No ☐

If no, skip to Section II – Physical Activity/Personal Safety

On-campus Yes ☐ No ☐

Has DSU Bar Services been contacted? (All events on-campus involving alcohol must be arranged through DSU Bar Services, 902-494-6891) Yes ☐ No ☐

Have non-drinking volunteers been assigned (trained in either SmartServe, CPR and/or First Aid) to monitor attendees? Yes ☐ No ☐

Number of expected participants? _____

Number of non-drinking volunteers present at the event? _____

(Note: 1 per every 25 participants is required) _____

Will attendees bring their health/insurance card (MSI, DSU Student Health Plan, etc.)? Yes ☐ No ☐

Will attendees bring government issued photo I.D. (driver's license, passport, etc.)? Yes ☐ No ☐

Will all-age events have a wristband policy in effect to identify those underage? Yes ☐ No ☐

Other: _____ Yes ☐ No ☐

Off-campus	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Will all alcohol be served by bartenders/venue?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Name of venue: _____				
Bartender/venue management are "SmartServe" trained and are aware of their responsibility not to over-serve or serve to minors?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will the entrance/ticket cost include alcohol?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
If so, how much alcohol is included in the ticket price (ex. two drinks)? _____				
Have non-drinking volunteers been assigned (trained in either SmartServe, CPR and/or First Aid) to monitor attendees?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Number of expected participants? _____				
Number of non-drinking volunteers present at the event? (Note: 1 per every 25 participants is required) _____				
Will attendees bring their health/insurance card (MSI, DSU Student Health Plan, etc.)?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will attendees bring government issued photo I.D. (driver's license, passport, etc.)?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will all-age events have a wristband policy in effect to identify those underage?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Other: _____			Yes <input type="checkbox"/>	No <input type="checkbox"/>

Section II PHYSICAL ACTIVITY/PERSONAL SAFETY RISK INVOLVED?

Yes ☐ No ☐

If no, skip to Section III – Travel

Moderate physical activity (dancing, skating, running, etc.)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
High physical activity (ice hockey, skiing, paintball, rock climbing, etc.)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Equipment involving a degree of risk (hot tubs, trampolines, major audio set up, etc.)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Personal safety issues (walking after dark, soliciting, working with 'at risk' persons, etc.)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will the Primary Event Organizer bring St. John Ambulance-approved first aid kit?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will there be volunteers (trained in either CPR or First Aid) designated to monitor attendees?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
How many volunteers will there be? _____		
Will attendees bring their health card (MSI, DSU Student Health Plan, etc.)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will crowd control measures be put in place?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
In case of emergency, have arrangements been made for evacuation of students with disabilities?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will security be aware of your event and any special circumstances (including minors' attendance)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are organizers aware of pertinent information regarding nearest hospital and means for transport (location/phone)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Other: _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Section III TRAVEL INVOLVED? Yes ☐ No ☐

If no, skip to Section IV – Community Relations

Are you arranging group transportation?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Rent cars/vans (insurance included in rental fee)? Name of company: _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Rent bus (insurance included in rental fee)? Name of company: _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Driving personal vehicle? Minimum \$1 million liability insurance acquired?	Yes <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> No <input type="checkbox"/>
Have travel arrangements been made for attendees with special needs? (If necessary)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are arrival/departure times known by all attendees?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have a contingency plan for persons missing return transportation?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will alcoholic beverages be permitted on the bus and/or rental van?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will intoxicated individuals be permitted to board the bus/rental van upon departure from Dalhousie University?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Will attendees bring health card, identification and passport (as required)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you traveling out of province? Does each student have adequate out-of-province health coverage?	Yes <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> No <input type="checkbox"/>
Are you traveling out of the country? Does each student have adequate international health coverage/travel insurance? Have all international students contacted the International Student and Exchange Services office to ensure all details and documentation are in order?	Yes <input type="checkbox"/> Yes <input type="checkbox"/> Yes <input type="checkbox"/>	No <input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/>
Will there be a designated bus/van/car monitor on/in each bus/van/car who will not consume alcohol during the event/trip? Name of bus/van/car monitor(s): _____ _____ _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Other: _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Section IV COMMUNITY RELATIONS (ON & OFF-CAMPUS) INVOLVED? Yes ☐ No ☐

If no, skip this section

Will there be amplified music/speeches?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you checked for adherence to HRM noise by-laws? (see www.halifax.ca/legislation/bylaws/hrm/bin200.pdf)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you holding the activity in a residential neighbourhood?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has a letter of notice been sent to neighbours and surrounding businesses?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has a clean up crew been designated/will venue staff clean up?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Other: _____	Yes <input type="checkbox"/>	No <input type="checkbox"/>