



What potential risks have you identified?	Date Inspected	What Problem was Detected (if any)	Likelihood A,B,C,D,E	Impact A,B,C,D	Risk Rating H,M,L (see Risk hart)	Who Will fix the problem?	When will it be fixed?	Completed (signed off)
Do you have procedures to ensure money ends up where it is supposed to?								
Do you have proper financial reporting procedures?								
Do you collect in-kind donations from the community? Do you have a process to ensure donations are appropriate and safe?								
Do conduct performances, festivals or events? Have you read the <i>Arts and Culture</i> checklists?								
Do you have appropriate licences or permits to conduct fundraising activities?								
Do you work with Young People? If so read the Youth checklist at <a href="http://www.ourcommunity.com.au">www.ourcommunity.com.au</a>								
Have you read the General checklists at <a href="http://www.ourcommunity.com.au">www.ourcommunity.com.au</a>								
Insert your own								
Insert your own								

## Risk Chart

### LIKELIHOOD

<b>IMPACT</b>	<b>RATING</b>		<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>
			<b>Frequent</b>	<b>Probable</b>	<b>Occasional</b>	<b>Remote</b>	<b>Improbable</b>
	<b>A</b>	<b>Catastrophic</b>	<b>High</b>	<b>High</b>	<b>High</b>	<b>High</b>	<b>High</b>
	<b>B</b>	<b>Critical</b>	<b>High</b>	<b>High</b>	<b>High</b>	Medium	Low
	<b>C</b>	<b>Marginal</b>	<b>High</b>	Medium	Medium	Low	Low
	<b>D</b>	<b>Negligible</b>	Medium	Low	Low	Low	Low

<b>MEASURE</b>	<b>IMPACT</b>	<b>Effect/description</b>
<b>A</b>	<b>Catastrophic</b>	Death – severe injury (e.g. loss or crushed limb, brain damage)
<b>B</b>	<b>Critical</b>	Major Injuries – require medical assistance (inc concussions)
<b>C</b>	<b>Marginal</b>	Minor Injuries, cuts, treated internally (inc minor sprains)
<b>D</b>	<b>Negligible</b>	No injury

<b>MEASURE</b>	<b>LIKELIHOOD</b>	<b>DESCRIPTION</b>
<b>A</b>	<b>Frequent</b>	Will occur regularly – day to day
<b>B</b>	<b>Probable</b>	Will occur on most occasions, circumstances
<b>C</b>	<b>Occasional</b>	Will occur from time to time
<b>D</b>	<b>Remote</b>	May occur but not regularly or often
<b>E</b>	<b>Improbable</b>	Unlikely to ever occur

**DISCLAIMER**

While all care has been taken in the preparation of this material, no responsibility is accepted by the author(s) or GIO its staff or volunteers, for any errors, omissions or inaccuracies. The material provided in this help sheet has been prepared to provide general information only. It is not intended to be relied upon or be a substitute for legal or other professional advice

No responsibility can be accepted by the author(s) or GIO for any known or unknown consequences that may result from reliance on any information provided in this publication.

