Charity Number 801069

PERSONAL MEMBERS' RISK ASSESSMENT

This risk assessment is to help you identify any personal risks you may experience. This is useful if you feel you are vulnerable and need to make considerations for the activities you participate in. You should think carefully about any specific risks you may encounter during a u3a activity. Where you identify a particular risk you should note the actions you will take to reduce the risk, and you can always add to this if you identify a new risk.

When you have completed this form, please give it to your Group Leader.

U3a Name **STEVENAGE**	Membership Number
Your name	
Address	
Interest group	
Description of Group Activity Eg. Meeting monthly, visiting public or private gardens, coffee shops/garden centre, or other outside activities	

PLEASE ENSURE THIS INFORMATION IS UPDATED AS AND WHEN APPROPRIATE

WHAT IS THE POTENTIAL RISK	HOW DO YOU USUALLY MANAGE THIS RISK	DOES THIS RISK AFFECT HOW YOU PARTICIPATE IN U3A ACTIVITIES	WHAT ACCOMMODATIONS DO YOU NEED
		Yes No N/A	
e.g. difficulty walking, health matters	*I use a stick.* *I carry medications*	*Yes*	*May need to sit during activities*
e.g. I have diabetes or other health condition	I carry medication	No	I monitor and manage the condition
e.g. I need help from a carer	My carer supports me with participating in Eg day to day activies	Yes	When participating in events I need space for my carer to join and support me

Signed ..... Dated.....

By signing this form you are agreeing to participate in this activity at your own personal risk.