

Probus Club of Windsor Inc OUTINGS/TOURS RISK MANAGEMENT FORM

| Outing: | | Date: |
|---|----------------------|---------------------------------|
| Location: | | Anticipated No of Participants: |
| Risk level: Low/Med/High | | Est Cost: |
| Organiser and Contact No: | | Email: |
| Free of Charge Benefit (to be shared with all attendees): | | |
| Travel Mode: | | |
| If car-pooling: | | |
| Walking Distance: | | |
| Terrain: | | |
| Clothing: | | |
| Weather Dependent: | | |
| Carers: | | |
| Participant Disabilities: | | |
| Record of Attendance: | | |
| Approval: | Probus Management Co | ommittee |
| Meeting Date: | | |
| Entered to Minutes | | |
| Other/Comments | | |
| | | |
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