



Exhibitors Risk Assessment

BOA ANNUAL CONGRESS 2026

Olympia London, 22-24 SEPTEMBER 2026

Stand No..... Date.....

Company Name.....

1. **Hazard Category:** Select the most appropriate category for the hazard you have identified. Look only for hazards on your stand, which you could reasonably expect to result in significant harm. Tick any of the following which are applicable:

- Adverse Weather Falling Objects Special Effects Noise
- Complex Structure Fall from Height Stored Energy Fire
- Compressed Air Dust / Fumes Gas / LPG Explosion
- Use of Vehicles Water Features Radiation Slip / Fall
- Use of Work Equipment Hazardous Substance Equipment Machinery Electricity
- Extreme Temperatures Use of lifting Equipment Others NONE

If you answered none return this form to the Organiser, if you ticked any of the above hazard categories, please complete the following sections for each individual hazard.

2. **Who is at Risk – identify the people who are at risk from this hazard.**

- Exhibitors Maintenance Staff Pregnant Workers
- Cleaners Members of the Public Disabled Persons
- Contractors Office Staff Children

3. **Risk Assessment** **Probability x Severity = Risk Rating**

- Very Low Risk 1 to 4 Requires no action.
- Low Risk 5 to 7 Requires no action.
- Medium Risk 8 to 14 May require action or creating more awareness, look at specifics.
- High Risk 15 to 36 Requires immediate action!



Probability – How likely is the hazard to cause harm?

1. Negligible _____
2. Possible Occurrence _____
3. Occasional Occurrence _____
4. Frequent Occurrence _____
5. Regular Occurrence _____
6. Common Occurrence _____

Severity – What is the worst possible outcome?

1. Trivial injury _____
2. Minor injury _____
3. Major injury to one person _____
4. Major injury to several persons _____
5. Death to one person _____
6. Multiple deaths _____

4. Existing control measures – What controls have been implemented to control hazard?

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5. Are these control measures adequate to contain hazards?

Yes No

6. What additional controls are required to control hazard?

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Contact Name.....

Signature.....