# Christmas Float Fundraising Event Notification Form

## How to obtain Public Liability Insurance cover

Thank you for organising a fundraising event in aid of The Fire Fighters Charity.

To obtain Public Liability Insurance for your fundraising event, the Fundraising Event Notification Form (FEN) must be completed with as much detail as possible including signing the declaration. All events must be comprehensively risk assessed either by completing Section 4 of the FEN or submitting your Fire and Rescue Service event risk assessment. If submitting a separate risk assessment you must complete all other sections of the FEN in full.

If you are Fire Service Personnel, it is your responsibility to seek the appropriate approval within your fire and rescue service for your event to take place.

To enable us to process your form please ensure that it is sent to our Customer Care Team at least **21 days** prior to your event.

**Email:** customercare@firefighterscharity.org.uk

**Post:** Customer Care, The Fire Fighters Charity, Level 6, Belvedere House, Basing View, Basingstoke, Hampshire, RG21 4HG

**Phone:** 01256 366566

## Public Liability Insurance cover – Conditions and Exceptions

The Fire Fighters Charity has in place Public Liability Insurance which provides cover up to £10,000,000 for the Charity. This Public Liability Insurance is extended to provide indemnity to the Organising Committee of any authorised and approved Event that may lead to injury or property damage to Third Parties.

To authorise an event the Charity require a completed Fundraising Event Notification Form (FEN). The Fire Fighters Charity will provide formal notification of the Event approval to the Contact Name contained within the FEN. You should not assume cover is in place until formal notification has been received and any conditions or requirements that may be made of You are accepted and implemented.

It is important that you read and understand any conditions or requirements. Failure to adhere to these may affect the insurance cover that has been arranged.

Many of the fundraising Events organised will involve third party suppliers and external contractors. This can range from catering contractors to hirers of marquees, fairground rides and bouncy castles. All suppliers and contractors must be competent and suitable. You should ensure you are satisfied they have undertaken the necessary risk assessments and have the appropriate controls to manage their contribution to the Event in a safe way.

**Where an event involves third party suppliers and external contractors, evidence of Public Liability Insurance (of at least £5m) and confirmation that maintenance and inspection programmes are in place, must be submitted with your completed FEN.**

Damage to equipment or hired-in property is not included in The Fire Fighters Charity's Public Liability insurance cover unless you are deemed legally liable for such damage and confirmation of cover has been provided.

It is not intended for the Charity's policy to provide Personal Injury cover for participants who have completed a risk assessment personally and are undertaking an event as an individual. Policy cover does not apply where injury occurs to the individual participant or in respect of any Injury or Property Damage to Third Parties caused. In these circumstances The Fire Fighters Charity would not be held responsible.

If this is the case, the individual involved needs to tick the box in section 1 of this form confirming that they have Personal Liability Insurance. A copy of the Personal Liability Insurance policy does not need to be provided.

Any back-up team supporting such an individual, participating in the event, would be covered by the Charity's insurance for Injury or Property Damage to Third Parties.

A minimum of 50% of the net proceeds raised from the Event for which Public Liability Insurance is being requested, must be donated to The Fire Fighters Charity.

## Section 1 Contact

The Contact is the person who is organising the event as part of, or on behalf of, a team and to whom all correspondence regarding the insurance application should be directed.

Contact Name: ..... Contact Address: .....

.....

Contact Phone Number: ..... Contact Email Address: .....

Fire Service Personnel: Yes ☐ No ☐ If 'yes', Fire and Rescue Service: .....

Please tick the appropriate box below:
I (the contact) am the sole organiser of this event and am taking part along with a support team. I confirm that I have taken out my own Personal Liability cover. ☐
I (the contact) am the sole organiser of this event. I am organising the event on behalf of a team/committee and am not taking part. ☐
I (the contact) am organising the event on behalf of a team/committee and am taking part. ☐

## Section 2 Event Details

Event Name / Type: Event Date: Event Location:

..... ..... .....

Number of visitors you expect to attend the event (approximate quantity of people you require public liability cover for): .....

Approximate amount of money you intend to raise: .....

Number of volunteers assisting at the event e.g. marshalls, store holders etc: .....

Will there be any participants under the age of 18?: Yes ☐ No ☐ If 'yes', please detail:

.....

Will there be any participants with disabilities that need special consideration?: Yes ☐ No ☐ If 'yes', please detail:

.....

Is this event raising money for any cause other than The Fire Fighters Charity? Yes ☐ No ☐
If 'yes', please name the other benefitting cause(s) below, their charity registration number(s) if applicable and the percentage of the net proceeds you will be donating to them.
**Note: A minimum of 50% of the net proceeds raised from the event must be donated to The Fire Fighters Charity. The Fire Fighters Charity's policy insures the Charity's legal liability; it does not extend to other charities or causes who may benefit from any monies raised.**

.....

## Event Overview

Please give a full description of the event including details of ALL activities taking place and equipment being used at the event.
Do not include details about safety precautions here – this should be detailed in the next section.

# **Section 3** Safety Precautions

Please list all safety precautions in place during the event.

## Safety Instruction

Detail the number of safety instructors present and qualifications they hold relevant to the event (e.g. 7 x abseil instructors with certified instructor certificates).

## Safety Equipment

Detail all the safety equipment to be used, stating who it is owned and maintained by. If applicable, please also state maximum weight and height restrictions for the equipment and whether it complies with EC and national standards.

## Public Safety

Detail all public safety precautions in place during the event (e.g. 6ft barrier around the event zone so public cannot cross etc).

## Accident and Emergency

List all first aid personnel onsite and the procedure in case of an emergency. Any back-up / support vehicles should also be detailed below.

## Completing the Risk Assessment Form

To carry out a risk assessment for your fundraising event, you must understand what might cause harm to people and decide whether you are taking reasonable steps to prevent that harm. Once you have decided that, you need to identify and prioritise putting in place, appropriate and sensible control measures.

To complete the Risk Assessment Form for your fundraising event, please follow these steps:

1. Identify the hazards at your fundraising event. A hazard is anything that may cause harm, such as chemicals, electricity, climbing a ladder etc.

2. Identify the categories of **Persons Exposed (PE)**
   E = Employees, C = Contractors, PU = Public, V = Visitors, YP = Young Persons, SC = Sub-contractors, PW = Pregnant Women, O = Other.

3. Identify the number of Persons Exposed in each category.
   **N = Number of people** (3 = Large numbers of people, 2 = Several people, 1 = Single person)

4. Identify how the Persons Exposed may be harmed.

5. Evaluate the risks at your fundraising event following the grid below to grade the likelihood of an event and the consequences. A risk is the likelihood, high or low, that somebody could be harmed by the hazards, together with an indication of how serious the consequences could be.

   **L = Likelihood** (3 = Definite, 2 = Probable, 1 = Unlikely)
   **C = Consequence** (3 = Fatal, 2 = Major, 1 = Minor e.g. cut, bumps, bruises)

| LIKELIHOOD | | | | |
|---|---|---|---|---|
| | 3 Definite | High | High | High |
| | 2 Probable | Medium | High<br>Medium | High |
| | 1 Unlikely | Low | Medium | High |
| | | 1 Minor | 2 Major | 3 Fatal |
| | CONSEQUENCE | | | |

6. Decide on the appropriate control measures. Control measures include actions that can be taken to reduce or remove the potential of exposure to the hazard.

7. Record your findings on your risk assessment form.

8. Review and update your risk assessment.

## **Section 4** Risk Assessment (continued)

Activity details:

Site / location: ..... Assessment date (dd/mm/yy): .....

Assessment reason:

Assessed by:

Persons exposed (please tick relevant box):

☐ Employees ☐ Contractors ☐ Public ☐ Visitors ☐ Young persons ☐ Sub-contractors ☐ Pregnant women ☐ Other

Hazards which create potential for harm (please tick relevant boxes):

| | | | | |
|---|---|---|---|---|
| ☐ Adverse weather | ☐ Vehicle overturning | ☐ Lifting operations | ☐ Manual handling | ☐ Confined spaces |
| ☐ Electrical supply (Vdc) | ☐ Electrical supply (Vac) | ☐ Overhead services | ☐ Buried services | ☐ Fire/explosion |
| ☐ Lighting levels | ☐ Electrical equipment | ☐ Office environment | ☐ DSE workspace – workspace activity | |
| ☐ Flying particles | ☐ Contaminated ground | ☐ Soft ground | ☐ Demolition | ☐ Work on/adjacent to water |
| ☐ Falls from height | ☐ Falls on level ground | ☐ Chemicals – COSHH | ☐ Heat – exposure burns | ☐ Vehicle damage/failure |
| ☐ Cash handling/security | ☐ Noise | | | |

Other items / comments:

| Descriptions / Details | | | Existing Current Risk | | | | | Actions & Residual Risk | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Ref | Hazards | Risk Details | Risk Factor LxC | | | | | Control Measures Comments / Actions | Residual Risk | | | |
| | | | PE | N | L | C | RR | | N | L | C | RR |
| *Example* | *Car wash - wet surfaces* | *Slips, trips and falls* | E<br>PU | 2 | 1 | 2 | 2 | • *Wear non-slip footwear*<br>• *Ensure soapy surfaces are regularly rinsed down*<br>• *Use grit if necessary* | 2 | 1 | 1 | 1 |
| 1 | *Injury to public* | *Muscular-skeletal injuries* | | | | | | • *Brief appliance driver*<br>• *Speed limit not to exceed 5mph*<br>• *Carriage of first aid kit*<br>• *Safety cordon around appliance maintained by crew members* | | | | |
| 2 | *Injury to fire fighters* | *Muscular-skeletal injuries* | | | | | | • *Crews made aware of appliance and float route*<br>• *Crews not to approach moving vehicles under any circumstances* | | | | |
| 3 | *Slips, trips and falls* | *Cuts and bruises* | | | | | | • *Appropriate footwear to be worn.* | | | | |

**KEY**
**PE = Persons Exposed (i.e. E = Employees, C = Contractors, PU = Public, V = Visitors, YP = Young Persons, SC = Sub-contractors, PW = Pregnant Women, O = Other) N = Number of people, L = Likelihood, C = Consequence, RR = Risk rating**

| Descriptions / Details | | | Existing Current Risk | | | | | Actions & Residual Risk | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Ref | Hazards | Risk Details | Risk Factor LxC | | | | | Control Measures Comments / Actions | Residual Risk | | | |
| | | | PE | N | L | C | RR | | N | L | C | RR |
| 4 | *Persons falling under float* | *Muscular-skeletal injuries* | | | | | | • *Children and vulnerable adults to be supervised at all times*<br>• *Marshals to be used with hand held communications to the appliance and float driver at all times*<br>• *Hi-visibility jackets to be worn by all* | | | | |
| 5 | *Driving of vehicle* | *Persons being run over, RTC* | | | | | | • *Trained driver with full driving licence* | | | | |
| 6 | *Objects falling from moving vehicle* | *Injuring personnel, members of the public or causing an RTC* | | | | | | • *Vehicle checks regularly carried out by appointed safety marshall*<br>• *Items to be fully secured to vehicle* | | | | |
| 7 | *Person riding on float* | *Santa being ejected from the vehicle* | | | | | | • *Safety harness to be used*<br>• *Low speeds maintained* | | | | |

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| Descriptions / Details | | | Existing Current Risk | | | | | Actions & Residual Risk | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Ref | Hazards | Risk Details | Risk Factor LxC | | | | | Control Measures Comments / Actions | Residual Risk | | | |
| | | | PE | N | L | C | RR | | N | L | C | RR |
| 8 | *Weather conditions* | *Adverse weather conditions causing slips, trips or falls* | | | | | | • *Monitor weather forecast prior to event and take appropriate precautions e.g. appropriate footwear, warm clothing, or if necessary, postpone the event* | | | | |
| 9 | *Money handling* | *Theft, physical attack* | | | | | | • *Security seals to be used on collection bucket/goblet*<br>• *Collection bucket/goblet to be emptied regularly so that large amounts of money are not visible to members of the public*<br>• *Minimum of 2 people to carry out collection as best practice for financial procedures and fraud protection for both parties and to decrease vulnerability* | | | | |
| 10 | *Uneven ground* | *Slips, trips or falls* | | | | | | • *Potentially hazardous floor surfaces identified and avoided during collection* | | | | |
| 11 | *Manual handling* | *Heavy buckets* | | | | | | • *Collection buckets to be emptied regularly to avoid injury from carry heavy weight*<br>• *Sharing of workload* | | | | |

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|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Ref | Hazards | Risk Details | Risk Factor LxC | | | | | Control Measures Comments / Actions | Residual Risk | | | |
| | | | PE | N | L | C | RR | | N | L | C | RR |
| 12 | | | | | | | | | | | | |
| 13 | | | | | | | | | | | | |
| 14 | | | | | | | | | | | | |
| 15 | | | | | | | | | | | | |

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| | | | PE | N | L | C | RR | | N | L | C | RR |
| 16 | | | | | | | | | | | | |
| 17 | | | | | | | | | | | | |
| 18 | | | | | | | | | | | | |
| 19 | | | | | | | | | | | | |

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## **Section 5** Declaration and Data Protection

I hereby confirm the following:

- I have read and understood the conditions and exceptions to insurance from The Fire Fighters Charity.
- The details in the Risk Assessment have been provided specifically and comprehensively for the site as detailed in Section 2 – Event Location.
- The Fundraising Event Notification Form (including the Risk Assessment), has been completed by the Event Organiser / Regional Fundraiser who is fully competent to assess and detail all the potential risks relevant to this event.
- **FOR FIRE SERVICE PERSONNEL ONLY:** I hereby confirm for all events being held on-station or during work time that my fire service is fully aware of this event and has given approval for it to take place. I have followed all necessary procedures within my Service prior to submitting this Fundraising Event Notification form.

Contact Name (as in Section 1):

.....

Name of person responsible on the day of the event (if different from Contact Name):

.....

Date:

.....

The information you have provided will be used by the Charity to fulfil your request. We would also like to use your information to enable us to contact you with news and information about The Fire Fighters Charity and ways to support us.

I would like to hear from The Fire Fighters Charity about: News and Information ☐ Ways to Support us ☐

Please let us know which methods of communication you are happy to receive information from The Fire Fighters Charity by (tick all that apply)

Email ☐ Phone ☐ SMS ☐ Post ☐ If you don't want to be contacted by third parties please tick here. ☐

**Thank you for completing the FEN form. Please await confirmation that your event is insured before you proceed. Until you have confirmation that insurance is in place your event will not be covered under the public liability insurance of The Fire Fighters Charity.**