

Event information form



Completion and return of this form **must not be taken** as an indication that cover is available for your event. St John Ambulance will only undertake first aid provision that does not infringe legal or safety requirements. Therefore **all questions must be fully answered**.

Once complete, please return to; St John Ambulance, Unit 7a, Summit Crescent Industrial Estate, Warley, West Midlands B66 1BT.

Name/title of event		Day and date			
Contact name at event		Tel no.			
Times of event	From: -			To: -	
Type of event					
Address of event including postcode and OS Grid Ref if available:					
Name and address of organisation					
Charity registration no. (if applicable)					
Organisers name and address					
Tel no.	Day:	Evening:	Fax:	Mobile:	
Name and address invoice to be sent to. (Subject to cover)					
1.	Max anticipated attendance?		2.	Are the majority age 16 or under?	Yes / No
3.	Activities at event; please list.				
4.	Are the activities outdoors?	Yes / No	If yes ; what type of terrain covered i.e. hard, uneven, hilly, roads?		
5.	Will first aiders need special clothing or footwear?	Yes / No	If yes ; please give details		

Type of cover required				
6.	Do you require an ambulance?	Yes / No	If yes ; how many?	
7.	Do you require first aiders?	Yes / No	If yes ; how many?	
8.	Do you require a first aid treatment unit on site?	Yes / No	If no ; what accommodation is available (hut/tent/room)?	
9.	Are there first aiders present from other organisations?	Yes / No	If yes ; which organisation(s)?	
10.	Have the emergency services been informed?	Yes / No	Which services will be present at the event?	
11.	Will a doctor be in attendance or on call?	Yes / No	If yes ; please provide the name and contact number of the doctor.	
12.	Does public liability insurance stipulate first aid cover?	Yes / No	If yes ; at what number / level?	
13.	Are there any club safety / rules to comply with?	Yes / No	If yes ; please detail or attach.	
14.	How many event sites/mats/pitches etc?		Please attach a plan / map of event	
15.	Are there any access restrictions?	Yes / No	If yes ; give details	
16.	Is drinking water available on site?	Yes / No	If yes ; give details	
17.	Are toilets available on site?	Yes / No	If yes ; give details	
18.	Is there electricity on site?	Yes / No	If yes ; give details	
19.	Is there a telephone available on site?	Yes / No	If yes ; give details	
20.	Is free parking available on site for St John Ambulance personnel?	Yes / No	If yes ; give details. Please note that if not available an extra charge may be incurred.	
21.	Will refreshments (other than drinks) be provided for St John Ambulance personnel?	Yes / No	If yes ; give details. Please note that if not available an extra charge may be incurred.	
22.	Can a 'duty officer' visit the event site if necessary?	Yes / No	If yes ; please give access hours prior to, and during, the event.	
23.	Additional information; please add information you feel would be useful in planning cover.			

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