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**HEALTH & SAFETY RENEWAL VALIDATION FORM**

**(For Additional Shows / Leagues 2016)**

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| --- | --- |
| **VENUE NAME:** |  |
| **VENUE LOCATION:** |  |
| **CONTACT DETAILS:** |

|  |  |  |  |
| --- | --- | --- | --- |
| **POSITIONS** | **NAME** | **Contact No.** | **Email** |
| **Show Organiser** |  |  |  |
| **Chief Safety Officer** |  |  |  |
|  |  |  |  |

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| **ADDITIONAL SHOW / LEAGUE DETAILS:** |

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| --- | --- | --- |
| **NAME OF SHOW / LEAGUE**(How appear on the Show Schedule) | **START DATE** | **END DATE** |
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| ***I / we certify that no changes / additions have occurred (i.e. with the venue, location, site layout / traffic management plan, resources, hazards or the health and safety doucmentation, etc) since recent Health and Safety approval and show authorisation was granted on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Date) by SJI.******I / we understand that if there are any changes / additions, etc that as show organiser, I/we are responsible to update relevant Health and Safety documentation and resubmit to the SJI office prior to the event for review and approval****.*  |
| **Show Organiser** | Signature | Print Name | Dated |
| **Chief Safety Officer** | Signature | Print Name | Dated |

**Please note that authorisation is not fully complete and the schedule will not be published in the SJI Bulletin or online until submission of the relevant Health and Safety documents.**