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| **EVENTS SAFETY MANAGEMENT : DEBRIEF** | **APPENDIX D** |

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| **Name of**  **Event** |  | **Date** | / / |
| **Debrief**  **Attendees** |  | | |
| **Name of Event**  **Co-ordinator** |  | **Contact Number :** | |

**Record suggestions for improvement if this event is likely to be held again and attach to the Safety Management Plan (Appendix A) or file with Event documents.**

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| **Issue raised** | **Recommendations for improvement** |
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