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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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