

# Allergy Risk Assessment for Upcoming Event

Date: [Insert Date]

Event Name: [Insert Event Name]

Location: [Insert Location]

**Dear [Recipient's Name],**

We are conducting an allergy risk assessment for the upcoming [Insert Event Name] scheduled for [Insert Event Date]. The goal of this assessment is to ensure the safety and well-being of all attendees, particularly those with food allergies or sensitivities.

## **Food Allergies:**

- Identify all food items to be served during the event.
- List potential allergens present in each dish (e.g., nuts, dairy, gluten).
- Outline measures taken to prevent cross-contamination.

## **Event Activities:**

- Description of activities that may pose allergenic risks (e.g., crafts involving allergens).
- Strategies to mitigate exposure to allergens during these activities.

## **Emergency Procedures:**

In the event of an allergic reaction, the following emergency procedures will be followed:

1. Immediate access to first aid kits and epinephrine auto-injectors.
2. Designated staff trained in allergy response.
3. Emergency contact information readily available.

## **References:**

For further information regarding food allergies and safety, please refer to the following resources:

- [Resource 1]
- [Resource 2]

Thank you for your attention to this important matter. We look forward to a successful and safe event.

**Sincerely,**

[Your Name]

[Your Title]

[Your Organization]

[Contact Information]