



4.2c RISK ASSESSMENT REPORT

To be completed before first use of a new venue, or when arrangements and facilities are altered significantly.

Venue:	
Date of assessment:	
Name of Person carrying-out assessment:	
Under each category below check for the existence of hazards or risks, or any new hazards or risks have been introduced. If any hazards or risks are present either remove the hazard/risk, or consider amending or cancelling the activity.	
Access to Playing/Training Area <i>Check that access to the playing area is safe and free from obstacles.</i>	
Is the area fit and appropriate for access? Yes / No	
<i>If not, describe the hazard, who may be at risk and mitigating action taken, if any:</i>	
Playing/Training Area <i>Check that the area and surroundings are safe and free from obstacles.</i>	
Is the area fit and appropriate for activity? Yes / No	
<i>If not, describe the hazard, who may be at risk and mitigating action taken, if any:</i>	
Equipment <i>Check that it is fit and sound for activity and suitable for age group/ability.</i>	
Is the equipment safe and appropriate for activity? Yes / No	
<i>If not, describe the hazard, who may be at risk and mitigating action taken, if any:</i>	
Welfare of Participants <i>Check that the participants register is up-to-date with medical information and contact details.</i>	
Is/are the register(s) in order? Yes / No	
<i>If not, please outline current state and action taken, if any:</i>	
Are coaches/captains are DBS checked and hold 1 st Aid Certificate? Yes / No	

Participants' Attire/Equipment <i>Check that participants are appropriately attired for the activity.</i>		
Are participants appropriately attired and safe for activity? Yes / No		
<i>If not, describe the unsafe equipment/attire, who may be at risk and mitigating action taken, if any:</i>		
Emergency Points <i>Check that emergency vehicles can access facilities, and that a working telephone is available with access to emergency numbers.</i>		
Are emergency access points checked and operational? Yes / No		
<i>If not, please outline current state and action taken, if any:</i>		
Is a working telephone available? Yes / No		
Are coaches/captains in possession of a mobile phone? Yes / No		
<i>If not, please outline the issues and mitigating action taken, if any:</i>		
Safety Information <i>Check that evacuation procedures are published and posted for all to see. Ensure that volunteers and staff have access to information relating to health and safety.</i>		
Are emergency procedures published and accessible? Yes / No		
<i>If not, describe what information is missing and mitigating action taken, if any:</i>		
Is there a need to take any further action? Yes / No		
<i>If yes, specify:</i>		
Print name:	Signature:	Date:
Please ensure that this form is completed legibly, signed and dated and return to: Club Secretary, Mrs Jo Stevenson, 78 Ilchester Road, Yeovil, Somerset, BA21 3BL		