

# TRURO RFC MINI JUNIOR SECTION 2008/9

## **Risk assessment form for Truro RFC MJ matches and practice sessions**

Venue:

Name and position of person doing check:

Date of check:

### **Playing/training area**

Check that the area and surroundings are safe and free from obstacles.

Is the area fit and appropriate for activity? Yes  No

(If no, please outline the hazard, who may be at risk and action taken, if any.)

### **Equipment**

Check that it is fit and sound for activity and suitable for age group/ability.

Is the equipment safe and appropriate for activity? Yes  No

(If no, please outline unsafe equipment, who may be at risk and action taken, if any.)

### **Performers**

Check that the attendance register is up to date with medical information and contact details. Check that performers are appropriately attired for the activity.

Is/are the register(s) in order? Yes  No

(If no, please outline current state and action taken, if any.)

Are performers appropriately attired and safe for activity? Yes  No

(If no, please outline unsafe equipment/attire and action taken, if any.)

### **Emergency points**

Check that emergency vehicles can access facilities, and that a working telephone is available with access to emergency numbers.

Are emergency access points checked and operational? Yes  No

(If no, please outline the issues and action taken, if any.)

Is a working telephone available? Yes  No

(If no, please outline the issues and action taken, if any.)

### **Safety Information**

Check that evacuation procedures are published and posted somewhere for all to see. Ensure that volunteers and staff have access to information relating to health and safety.

Are emergency procedures published and accessible to those with responsibility for sessions in the club? Yes  No

(If no, please outline what information is missing and action taken, if any.)

Does the club need to take any further action? (If yes, please specify.)

Signed

Name:

Date: