



www.golfskillscymru.co.uk

Sample Risk Assessment/Session Safety Form.

Venue

Date of Check

Name and position of person doing check.....

Playing area

Check that the area and surroundings are free from obstacles.

Is the area fit and appropriate for activity?

Yes No

(Please outline the hazard. Who may be at risk and action taken, if any?)

.....
.....
.....

Equipment

Check that they are fit and sound for activity and suitable for age group/ability.

Are the Equipment safe and appropriate for activity? (Please refer to Goal post safety leaflet)

Yes No

(Please outline unsafe equipment. Who may be at risk and action taken, if any)

.....
.....
.....

Players

Check that the players' register is up to date with medical information and contact details.

Check that players are appropriately dressed for the activity.

Is/are the register(s) in order?

Yes No

(Please outline current state and action taken, if any)

.....
.....
.....

Are players appropriately attired and safe for activity?

Yes No

(Please outline unsafe equipment/attires and action taken, if any)

.....
.....
.....