

This Match Day Inspection is a Risk Management tool that should be completed at the start of the day at each venue. It is designed with Amateur sports volunteers in mind to assist you to identify risks present on the day and to take steps to prevent injuries to players and harm to others at the venue resulting in claims for negligence. This inspection does not identify all risks. Gow-Gates & FFA suggest you use your own experience and initiative to identify additional risks that may be present.

A representative from each participating team should consider the matters presented on this form and sign it attesting to the information it contains.

This completed form should be presented to the Ground Manager and kept on file by the home club.

Venue:

Date:

## Matches

Are there any matches to be played today which pose a greater than normal risk?

Points to consider include: Player defections, previous matches played with bad blood, local derby, close position on the ladder.

Yes  No

Have match officials been made aware of any increased risks?

Points to consider include: matches as per Q1 and areas of the playing surface

Yes  No  N/A

## Field of Play

Is ground marking compliant with FIFA and FFA regulations and local by-laws?

Yes  No

Is the playing field free of any debris that may cause increased risk of injury?

Points to consider include: Broken Glass, Sprinkler Heads, Sprinkler Covers, Tree Roots, Hard Cricket Pitches, Pot Holes, Tent/Tarpaulin Pegs, Cans

Yes  No

Is any perimeter fencing a safe distance from the field of play and/or adequately covered to prevent injury?

Yes  No

Are Goal posts and nets secured correctly and compliant with FIFA, FFA and Local By-Laws?

Yes  No

## Location

Is a stretcher available?

Yes  No

Is there access for an ambulance to the field of play & ramp access to change rooms?

Yes  No

Are public areas free of visible risks?

Points to consider: Collapsed seats, Protruding wires, Broken Windows, Damaged steps, Steps without hand rails

Yes  No

Are First aid kits / qualified personnel on hand?

Yes  No

## Are change rooms clean and Hygienic?

Points to consider: Blood Spillage, Sharp edges, medical supplies safely stored

Yes  No

Is "Safe Football" collateral displayed and made available to match day volunteers?

Yes  No

## Weather

Is Weather fit to commence play?

Points to consider: Heavy Rain, Hail, Fog, Lightning and Heat

Yes  No

Is extreme weather predicted for the day which could pose a risk?

Yes  No

*Please complete and sign the reverse of this form.*

## Action Taken

If any risks have been identified in completing this form please provide details below including steps taken to reduce risks.

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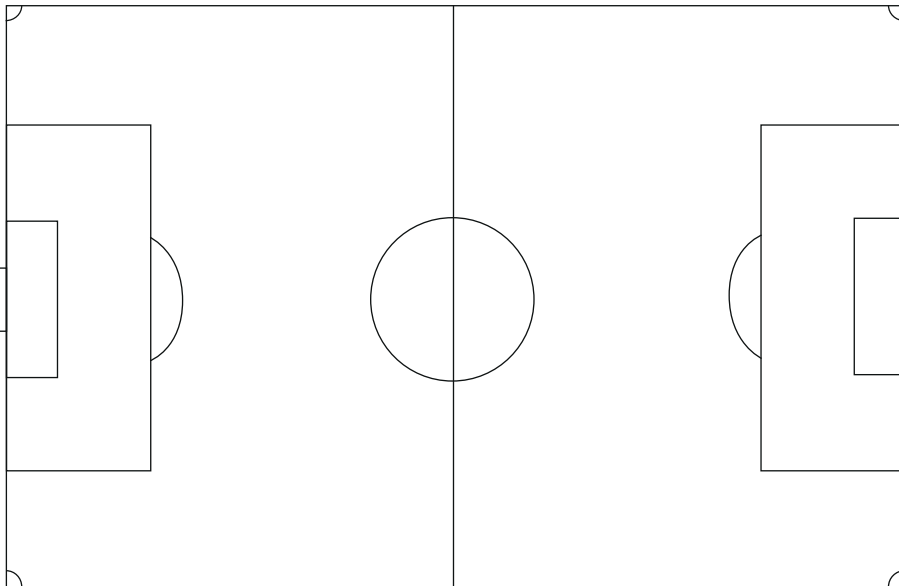
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Can you please highlight on the below diagram the location of any identified risks.



## Home Club Representative

Name: \_\_\_\_\_ Sign: \_\_\_\_\_

## Away Club Representative

Name: \_\_\_\_\_ Sign: \_\_\_\_\_