

EVENT DAY CHECKLIST



Name of Event :	Date :
Exact Location of Event :	Time :
Event Description :	
Name of person completing checklist :	Contact number :
Event Manager / Organiser :	Contact number :

This Event Inspection is a Risk Management tool that should be completed at the beginning of the day at each event/venue. It is designed with Amateur sports volunteers in mind, to assist in identifying risks present on the day and the process involved to prevent injuries to riders and harm to others at the venue, which may result in claims for negligence. This inspection does not identify all possible risks and Gow-Gates suggest you use your own experience and initiative to identify additional risks that may be present.

A representative from the organising club should consider the matters presented on this form and sign it attesting to the information it contains. If the venue is deemed to be unsuitable for use, the club needs to address the problems noted or relocate to an alternate venue.

This form should be completed by the designated Responsible Officer prior to the event.

General

Have all responsible officers been briefed on duties and procedures?

Yes No

Have all volunteers signed in, been assigned and fully understand their duties?

Yes No

Events

Are there any events to be undertaken today which pose a greater than normal risk?

[Point to consider: Cross Country event to be held after heavy rainfall / on wet ground?](#)

Yes No If YES please provide details in the space provided below

Comments:

Have event officials been made aware of any increased risks?

Point to consider: If there were any issues with the competition areas, have the relevant officials assessed the situation and deemed the event safe to go ahead?

Yes No If NO please provide details in the space provided below

Comments:

Areas of Use

Are the grounds compliant with local by-laws?

Points to consider: Are spectators appropriately separated from the competition area?

Yes No If NO please provide details in the space provided below

Comments:

Are the competition areas and stables clear of any debris that may cause increased risk of injury?

Points to consider: broken glass, uneven surface, exposed tree roots, etc

Yes No If NO please provide details in the space provided below

Comments:

Is perimeter fencing safe and adequate to prevent injury?

Points to consider: post and rails are well maintained, electric fencing is clearly labelled, star pickets have plastic caps, etc

Yes No If NO please provide details in the space provided below

Comments:

Is all equipment secured correctly, in good repair and safe condition? Is equipment not being used today securely stored?

Points to consider: Are cups, rails and wings, or arenas all of safe standard?

Yes No If NO please provide details in the space provided below

Comments:

Arena / Course Surface

Is the surface considered to be safe for competition?

Points to consider include: uneven surface, pot holes, shifting surface areas, depressions, undulations.

Yes No If NO please provide details in the space provided below

Comments:

Spectator Areas

Are public surrounding areas free of visible risks?

Points to consider: collapsed seats, protruding wires, damaged steps, uneven surface (paths, walkways), lighting, etc

Yes No If NO please provide details in the space provided below

Comments:

Are club facilities clean and hygienic?

Points to consider: receptacles for sharps and blood soiled clothing/dressings, medical supplies safely stored

Yes No If NO please provide details in the space provided below

Comments:

Are club utilities and services in good working order?

Points to consider: Electricity connected, appropriate indoor/outdoor lighting, drinking water, etc

Yes No If NO please provide details in the space provided below

Comments:

Is the car park safe and appropriately signposted with float parking isolated from spectator parking to avoid potential accidents?

Points to consider: Condition of Entry, segregation for horse trucks and spectator vehicles, directional arrows, etc

Yes No If NO please provide details in the space provided below

Comments:

Have marshals been organised to control vehicle traffic?

Points to consider: Suitably positioned at entries to control vehicles, horse and pedestrian flow?

Yes No If NO please provide details in the space provided below

Comments:

Other

Is Risk Management information displayed and made available to event day volunteers?

Yes No

Is an ambulance officer or certified first aid attendant with First Aid Kits on hand for duty at all times when competitors or members of the public are present?

Yes No

Is a stretcher and neck brace available?

The stretcher should ideally be a "scoop" style stretcher

Yes No

Has a First Aid area been designated, signage erected and clearly visible to patrons?

Yes No

Is there access for an ambulance to the competition and stable areas?

Yes No If NO to any of the above, please provide comments in the space below

Comments

Weather

Are the weather conditions conducive for a safe event? Are there policies in place to refer to before deciding if the event should take place or be delayed?

Points to consider: heavy rain, hail, fog, lightning, extreme heat, adequate shelter available

Yes No If NO, please provide comments in the space provided below

GENERAL COMMENTS: _____

This Event Checklist was conducted by:

Name: _____

Signed: _____

Position: _____

Date: ____ / ____ / ____

Please ensure that this form is completed by, or handed to the Responsible Officer for review as well as retained by the club for record.

