



FACILITY SAFETY CHECKLIST (GYM)

Prior to every practice or game, assess the following facility characteristics before allowing players into the facility. On the form, indicate if the characteristic is “Ok” or indicate the “correction code”. In the space provided, describe the problem and possible adjustment you feel is needed to make the facility safe.

| Facility: | | Date (dd/mm/yy): | | |
|--|---|------------------|-----------------|---------------------------------|
| Item | Possible Risks | Ok (✓) | Correction Code | Problems and Adjustments Needed |
| ENVIRONMENT: Playing surface and installations | Playing Surface (Even – No holes) | | | |
| | Playing Surface (Clean – No debris) | | | |
| | Immovable Objects (Bleachers, Posts, Basketball nets) | | | |
| | Lighting | | | |
| | Other: | | | |
| EQUIPMENT: Team / Individual | Balls | | | |
| | Bats | | | |
| | Bases | | | |
| | Gloves | | | |
| | Helmet | | | |
| | Catcher's Equipment | | | |
| | Field Markers | | | |
| | Clothing / Uniforms | | | |
| | Shoes / Cleats | | | |
| | Other: | | | |
| FIRST AID | Latex Gloves | | | |
| | Band-aids | | | |
| | Bandages | | | |
| | Gauze Pads | | | |
| | Adhesive Tap | | | |
| | Skin cream (Abrasions) | | | |
| | Scissors | | | |
| | Tweezers | | | |
| | Plastic Bags (ice) | | | |
| | Medical Contact Info | | | |
| | Sun Screen | | | |
| | Other: | | | |
| HUMAN FACTORS | Crowding (Enough space) | | | |
| | Grouping (Participant size, skill level, age) | | | |
| | Spectators / Parents | | | |
| | Other: | | | |
| Correction Codes: 1 - add 2 - replace 3 - modify 4 - discard 5 - clean 6 - repair 7 - check | | | | |



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Note: This document, once completed, should be given to the facilities manager or local association contact. The coach should keep a copy for his/her files.

| | | | |
|----------------------------|--|------------------------|--|
| Name of Coach: | | Date (dd/mm/yy) | |
| Signature of Coach: | | | |
| Form given to: | | Date (dd/mm/yy) | |
| Signature: | | | |