

## Facility Safety Checklist

Facility: \_\_\_\_\_

Date: \_\_\_\_\_

Inspected by \_\_\_\_\_

Item	Adequate	Inadequate	Corrective Measures*	Observations
Playing surface and installations				
Dressing Room				
Team Equipment				
Individual Equipment				

\*Corrections: 1-add 2-replace 3-modify 4-discard 5-clean 6-repair 7-check