

# Match Day Ground Checklist

Home Team : \_\_\_\_\_ Away Team: \_\_\_\_\_

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

**The ground is free from debris (glass, stones, faeces, etc).** YES NO  
If **NO**, what action was taken?

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**Sprinkler heads and taps are covered and level with the surrounds.**    
If **NO**, what action was taken?

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**The ground is free from holes or uneven sections that could cause tripping and falls.**    
If **NO**, what action was taken?

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**The goalpost covers are intact and secure.**    
If **NO**, what action was taken?

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**The weather conditions are safe for play to commence.**    
If **NO**, what action was taken?

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**The grounds and surrounds are free from other hazards that create danger for players.**    
If **NO**, what action was taken?

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**There are appropriate first aid personnel, equipment and phone contact with emergency services should it be required.**    
If **NO**, what action was taken?

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**A Ground Marshall has been appointed for the first match of the day, and for the following games. Contact has been with an official of the visiting team.**

**Other comments regarding ground safety:**

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**Prior to commencement of play/training, I/We have undertaken the above inspections and agree that the playing surface is unsafe/safe for play to commence.**

**Name of Club Representative** \_\_\_\_\_

**Position Held** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Follow up required by Club or Association** Yes  No