RECREATIONAL SPORTS THIS FORM MUST BE FILLED OUT EACH AND EVERY TIME THE CLUB PRACTICES. **Sport Clubs Program**

Safety Checklist-

Club:	
Date:	Time:

Please check appropriate answers to the following:

Location of Activity:		YES	NO
1.	Was the area clean when you arrived?		
2.	Was the area in safe playing conditions? (were there any obstacles on		
	the playing surface, was floor clean?		
3.	Was the equipment inventory complete? (were you missing any items?		
	If so, list what was missing below)		
4.	Was the equipment in safe working condition and set up correctly?		
5.	Was your First Aid Kit accessible?		
6.	How many new participants were at practice?		
	Did they all sign waivers?		
7.	Were all participants UNT students?		
8.	Were there any accidents? If yes, please attach the completed accident		
	form.		
9.	Were there any incidents? If yes, please attach the completed incident		
	form.		

If "No" was checked on any of the above questions, or "Yes" on questions 8 and/or 9, please indicate the reason:

Additional Comments/Concerns:

Please list problems, repairs needed, or comments on the back of the page.
