

Event Day Inspection



Club:		Date:
Location:		Time:
Event Description:	Club Responsible Officer:	Event Designer:
Weather Conditions:	Contact number:	Contact number:
This Event Inspection is a Risk Management tool that should be with Amateur sports volunteers in mind, to assist in identifying riders and harm to others at the venue, which may result in cla Gow-Gates suggest you use your own experience and initiative	g risks present on the day and th ims for negligence. This inspecti	e process involved to prevent injuries to on does not identify all possible risks and
A representative from the organising club should consider the contains. If the venue is deemed to be unsuitable for use, the c		
This form should be completed by the designated Responsible	Officer prior to the event.	
Events	Areas of Use	
Are there any events to be undertaken today which pose a greater than normal risk?	Are the grounds comp and local by-laws?	liant with EA regulations
Point to consider: Cross Country event to be held after heavy rainfall / on wet ground?	Points to consider: Are the competition area?	spectators appropriately separated from
Yes No If YES please provide details in the space provided below	Yes No If NO please provide details	in the space provided below
Comments:	Comments:	
Have event officials been made aware of any increased risks Point to consider: If there were any issues with the competit areas, have the relevant officials assessed the situationand deemed the event safe to go ahe Yes No	may cause increased r Points to consider: bro roots, etc Yes No	reas and stables clear of any debris that isk of injury? ken glass, uneven surface, exposed tree in the space provided below
Comments:	Comments:	

Is perimeter fencing safe and adequate to prevent injury?	Are club facilities clean and hygienic?	
Points to consider: post and rails are well maintained, electric fencing is clearly labelled, star pickets have plastic caps, etc	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	Yes No If NO please provide details in the space provided below	
Comments:	Comments:	
Is all equipment secured correctly and compliant with EA and Local By-Laws? Is equipment not being used today securely stored? Points to consider: Are cups, rails and wings, or arenas all of	Are club utilities and services in good working order? Points to consider: Electricity connected, appropriate indoor/outdoor lighting, drinking water, etc	
correct standard (EA Rules and Regs)? Yes No If NO please provide details in the space provided below	Yes No If NO please provide details in the space provided below	
Comments:	Comments:	
Spectator Areas	Is the car park safe and appropriately signposted? Points to consider: Condition of Entry, segregation for horse	
Are public surrounding areas free of visible risks? Points to consider: collapsed seats, protruding wires, damaged steps, uneven surface (paths, walkways), lighting, etc	trucks and spectator vehicles, directional arrows, etc Yes No If NO please provide details in the space provided below	
☐ Yes ☐ No If NO please provide details in the space provided below	Comments:	
Comments:		

Other			
Is "Safe Equestrian" collateral displayed and made available to event day volunteers?	Is there access for an ambulance to the competition and stable areas? Yes No If NO please provide details in the space provided below		
☐ Yes ☐ No Are First Aid kits and qualified personnel on hand? ☐ Yes ☐ No Is a stretcher and neck brace available? The stretcher should ideally be a "scoop" style stretcher			
	Comments:		
☐ Yes ☐ No			
Weather Are the weather conditions conducive for a safe event? Are the place or be delayed?	ere policies in place to refer to before deciding if the event should take		
Points to consider: heavy rain, hail, fog, lightning, extreme hea	at, adequate shelter available		
Yes No If NO please provide details in the space pro			
General Comments:			
This Event Day Inspection Sheet 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.