WESTCLIFF RFC



(Formerly Old Westcliffians Rugby Football Club).

Coaching Venue:	Session Date:	
Group Type/Size:	Session Topic:	
Coach(es)		
Health and Safety Checklist		
Location of the venue's		
health and safety policy		
Location of the nearest		
telephone:		
Location of the nearest	First	
Aid Kit:		
Name of the Appointed	First	
Aider:		
Please tick ✓ to confirm the	at the following items have been checked.	
	appropriate for the age and activity of the players.	
All equipment is handled, setup, dismantled and stored correctly.		
	ties have been checked for actual or potential hazards.	
A register of players has b		
Players' previous experien	r, eye glasses and jewellery have been checked as	
appropriate.	, eye glasses and Jewellery have been checked as	
арргорпасс.		
Please tick • to confirm th participants.	at the following have been explained to the players and	other
Health and safety procedu	ires.	
The rule of the facility/ven		
Any potential hazards		
The emergency procedure	S.	
I confirm that I have comple	eted all the above and the coaching venue and players a	re able to
safely participate in the pla		
Caralda		

Date:

signature: