



# GROUND INSPECTION CHECKLIST

TO BE COMPLETED & SIGNED BY GROUND MANAGER AND REFEREE  
PRIOR TO COMMENCEMENT OF DAYS PLAY

GROUND \_\_\_\_\_

DATE \_\_\_\_\_

| ITEM | INSPECTION ITEM  | YES | NO |
|------|--|-----|----|
| 1.   | PLAYING SURFACE IN SATISFACTORY CONDITION & FREE OF FOREIGN DEBRIS                               |     |    |
| 2.   | PLAYING ARENA CLEARLY MARKED WITH CORRECT & VISIBLE LINES  |     |    |
| 3.   | PLAYING ARENA FENCED OFF OR SUITABLY ROPED OFF   |     |    |
| 4.   | GOALPOSTS FITTED WITH GOALPOST PROTECTOR PADS  |     |    |
| 5.   | OFFICIAL TABLE SITUATED ON HALF-WAY LINE WITH TIMEPIECE & SOUNDING DEVICE PROVIDED BY BOTH TEAMS |     |    |
| 6.   | AREA FOR TEAM OFFICIALS & INTERCHANGE PLAYERS DESIGNED & MARKED ACCORDINGLY                      |     |    |
| 7.   | DESIGNATED FIRST AID OFFICER PRESENT & ACKNOWLEDGED  |     |    |
| 8.   | AMBULANCE ACCESS POINT TO GROUND CLEAR & AVAILABLE   |     |    |
| 9.   | FIRST AID KIT & STRETCHER ON SITE  |     |    |
| 10.  | AVAILABILITY OF CHANGE ROOMS   |     |    |
| 11.  | BOTH TEAMS MUST PROVIDE TWO SUITABLE SIZE 5 RUGBY LEAGUE BALLS FOR THE MATCH                     |     |    |

MANAGER \_\_\_\_\_

SIGNATURE \_\_\_\_\_

REFEREE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

COMMENTS \_\_\_\_\_

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\* NOTE: BLUE TEAM SIGN ON AND GROUND SHEETS ARE TO BE FAXED TO BOB LENNOX ON (02) 9620 4091 BY THE FOLLOWING WEDNESDAY, AND ALL ORIGINAL SHEETS ARE TO BE HANDED IN AT THE NEXT RELEVANT COMMITTEE MEETING.