Game Venue:		YES (Accept	otable)	
Date of Inspection: DD/MM/YYYY		100000000000000000000000000000000000000	tisfied the conditions are play please mark () in	
Time: HH:YY (24)		the "YES" of		
Home Team:		NI- (1)		
Away Team:		No (Action R	equired) safety concern please mark	
Training:		(□) in the '	NO" column and record in the space provided.	
ndining.		your decions	in the space provided.	
Please refer to the Checklist Guidelines (page 1) for further information, terms & conditions. (Acceptable) (Action Required) YES/NO				
WEATHER CONDITIONS:				
In regard to player safety, are the weather conditions satisfactory for play to commence?				
FIELD OF PLAY				
In regard to player safety, are the playing surfaces (including the field and pitch) satisfactory for play to commence?				
Has all visible debris, that may affect player safety, been removed?				
Are the game formats and ground markings in-line with Cricket Australia's Playing Policy & Guidelines ("Well Played")?				
Are all sprinkler covers intact and level with the playing field?				
• In regard to player safety, are the perimeter fences and/or signs free from visible hazards?				
• Are all boundary markers (lines, ropes, hats, etc) at least 3 yards / 2.74 metres away from any off field hazards including but not limited to fencing, concrete perimeters, trees, or other solid structures which may cause injuries to fielders?				
FACILITIES				
In regard to safety, are the public areas (e.g. seating and walkways) free of visible hazards?				
• In regard to safety, are the player's areas (e.g. change rooms) free from visible hazards?				
Are First Aid facilities (e.g. First Aid Kit, qualified personnel and ice) on site and accessible?				
Are there shaded areas, sunscreen and clean drinking water available?				
OTHER FACTORS (PLEASE INSERT DETAILS OF SAFETY AREAS SPECIFIC TO YOUR CIRCUMSTANCES):				
Are the following area/s (below) satisfactory for play to commence?				
PLEASE PROVIDE DETAILS OF ACTIONS TAKEN TO ADDRESS YOUR SAFETY CONCERNS:				

DECLARATIONS

I / We declare that I / We are authorised representatives of the nominated Teams.

I / We declare that after reasonable inquiry, the following statements are true and accurate:

- A. the above inspection (Game Day Checklist) was completed as per the above date and time.
- **B.** all hazards, risks and safety concerns have been addressed to an acceptable level and recorded on this form (Sec. 5) both teams are satisfied that the playing conditions are acceptable prior to the commencement of play.;

WHO SIGNS THE CHECKLIST?

As the home club is responsible to ensure the greater environment of the venue is safe for members and guests, an authorised (18+ years of age) home club representative signs the form. As the away team players and entourage participate in the game under the same conditions, an authorised (18+ years of age) away team representative also signs the form. As the laws of cricket state that umpires make decisions regarding the field of play, if a neutrally appointed umpire/s are in use there is space for the umpire to sign, effectively agreeing that the playing conditions are safe.

Home Team Authorised Representative's Name (please print)	Away Team Authorised Representative's Name (please print)
Position at Club	Position at Club
Home Team Authorised Representative's Signature	Away Team Authorised Representative's Signature

The advice in this form is general advice only. To help you decide if the cover suits you, please read the Product Disclosure Statement. We can provide you with further information. Please contact us to request. This insurance is arranged by Marsh Advantage Insurance Pty Ltd (ABN 31 081 358 303, AFSL 238 369) ('MAI'). MAI are not the insurer.