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Night Golf Risk Assessment

Name and position of person doing check:

Venue:

Date of check:

Playing Area/Golf Course/Surrounding Area

Check that the golf course and surroundings are safe and free from unusual obstacles. Is the area fit and appropriate for night golf? (e.g. No flooding, car park

and clubhouse lighting, heating, security and welfare arrangements). Yes No

(If no, please outline the hazard, which may be at risk and action taken, if any.)

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Equipment

Check that the glow sticks are all activated and working in good order.

Is the equipment safe and appropriate for activity?

(e.g. check there is no equipment left from other activities or

unusual obstructions left in the golfing area). Yes No

(If no, please outline unsafe equipment, who may be at risk and action taken, if any.)

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Participants

Check that players are all present and take a list of final number of participants.

Check that participants are all appropriately dressed for the activity and have a glow necklace and personal torch.

Is/are the register(s) in order? Yes No

(If no, please outline current state and action taken, if any.)

.....

Are participants appropriately attired and lit for the activity? Yes No

(If no, please outline unsafe equipment/attire and action taken, if any.)

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Check that emergency vehicles can access facilities, and that a working telephone is available with access to emergency numbers.

Are emergency access points checked and operational? Yes No

(If no, please outline the issues and action taken, if any.)

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Is a working telephone available? Yes No

(If no, please outline the issues and action taken, if any.)

.....

Safety Information

Check that evacuation procedures are published and posted somewhere for all to see. Ensure that volunteers and staff have access to information relating to health and safety.

Are emergency procedures published and accessible to those with responsibility for sessions in the club? Yes No

(If no, please outline what information is missing and action taken, if any.)

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Does the club need to take any further action? (If yes, please specify.)

.....

Signed: **Date:**

Name:

N.B. A new risk assessment form should be completed at the start of each event, to ensure you cover the golf club should the incident happen again, and any resultant changes made to the club's code of practice.

Disclaimer: This template has been provided to assist the responsible person with the preparation of a risk assessment and is not intended for commercial profit or gain. It may not be suitable for use in some large or complex premises. Whilst every care has been taken to ensure the adequacy and suitability of this template, Night Golf Supplies nor its parent company Global Marketing Group Limited accepts no responsibility for any content added, edited or deleted by the user. Use of this template will not automatically guarantee the completed risk assessment will be regarded as "suitable and sufficient".