

Venue Safety Checklist

(For use at one off meetings)

Wollaton U3A		
Main Meeting / Interest Group Name:		(Delete / Complete)
Date:	Location:	
Checklist		Yes = <input type="checkbox"/> No = <input type="checkbox"/>
1	Emergency Exits (Unobstructed & Unlocked)	
2	Fire Extinguishers in place	
3	Toilet facilities (Accessible/Unlocked / Clean / Toilet Paper / Soap / Towels)	
4	Walkways free from trip hazards	
5	Kitchen Facilities (Accessible / Clean)	
6	Kettle Leads (Good condition / No wear or fraying / Plug securely attached)	
7	Refreshment items available	
8	First Aid equipment accessible	
9	Safety Briefing given <ul style="list-style-type: none"> • Emergency exits location • Assembly point • What to do if fire discovered • What to do if the alarm sounds • Accident / injury reporting • Toilet and washing facility location 	
10	Other (specify) – Include any adjustments made for those with disability	
Comments (if any):		

Signature:

Print Name:

Approved by Committee 15/2/2024

Review due by Feb 2027