



**WALSALL TENNIS CLUB**  
 (formerly BIRMINGHAM ROAD LAWN TENNIS CLUB)

Club grounds at the rear of the Metro Inn, Birmingham Road, Walsall

[www.walsalltennis.co.uk](http://www.walsalltennis.co.uk)

*President: (vacant)*



**Secretary:** Mr Rick Magnante, 12, Scott Road, Walsall, WS5 3PU.

Telephone: 01922 645130

**RISK ASSESSMENT FORM FOR FACILITIES**  
 (To be completed annually)

<b>Premises:</b>	Walsall Tennis Club, rear of the Metro Inn, Birmingham Road/Broadway, Walsall WS5 3AB		
<b>Name and position of person doing check:</b>			
<b>Date of check:</b>			
<b>Playing/Training Area:</b>			
Check that the area and surroundings are safe and free from obstacles.	<i>Please Circle</i>	Checked	Not Checked
Is the area fit and appropriate for activity?		Yes	No
If <b>NO</b> , please outline the hazard, who may be at risk and action taken, if any:			
<b>Equipment:</b>			
Check that it is fit and sound for activity and suitable for age group/ability:	<i>Please circle</i>	Checked	Not Checked
Is the equipment safe and appropriate for activity?		Yes	No
If <b>NO</b> , please outline unsafe equipment, who may be at risk and action taken, if any:			
<b>Performers:</b>			
Check that the performers register is up to date with medical information and contact details:	<i>Please circle</i>	Checked	Not Checked
Check that performers are appropriately attired for the activity.		Checked	Not Checked
Is/are the register(s) in order?		Yes	No
If <b>NO</b> , please outline current state and action taken, if any:			

Is/are the register(s) in order?	<i>Please circle</i>	Yes	No
If <b>NO</b> , please outline current state and action taken, if any.):			
<b>Emergency Points:</b>			
Check that emergency vehicles can access facilities, and that a working telephone is available with access to emergency numbers:	<i>Please circle</i>	Checked	Not Checked
Are emergency access points checked and operational?		Yes	No
If <b>NO</b> , please outline the issues and action taken, if any:			
Is a working telephone available?	<i>Please circle</i>	Yes	No
If <b>NO</b> , please outline the issues and action taken, if any.			
<b>Safety Information:</b>			
Check that evacuation procedures are published and posted somewhere for all to see:	<i>Please circle</i>	Checked	Not Checked
Ensure that volunteers and staff have access to information relating to health and safety:		Checked	Not Checked
Are emergency procedures published and accessible to those with responsibility for sessions in the club?		Yes	No
If <b>NO</b> , please outline what information is missing and action taken, if any:			
Does the club need to take any further action?	<i>Please circle</i>	Yes	No
If <b>YES</b> , please specify:			

Signed: .....

Print Name: .....

Date: .....