

## VENUE CHECKLIST – DAY OF USE

<b>U3A Name:</b>	
<b>U3A Interest Group:</b>	
<b>Location/Postcode:</b>	
<b>Date:</b>	
<b>Description of Activity:</b>	

<b>CHECK</b>		<b>Yes (✓)</b>
1	<b>Emergency Exits unobstructed</b>	
2	<b>Emergency Exits unlocked</b>	
3	<b>Fire Extinguishers in place</b>	
4	<b>Toilet facilities open, clean, paper available etc</b>	
5	<b>Walkways free from trip hazards</b>	
6	<b>Kitchen facilities accessible &amp; clean</b>	
7	<b>Kettle leads in good condition, free from wear and fraying, plug securely attached</b>	
8	<b>Refreshment materials available</b>	
9	<b>First Aid equipment accessible</b>	
10	<b>Safety Briefing given</b> a. Emergency exits b. Assembly point c. What to do if fire discovered d. What to do if the alarm sounds e. Accident / injury reporting f. Toilet and washing facility location	
11	<b>Other(specify)</b>	
12	<b>Other(specify)</b>	

**NOTES**

Signature

Position

Date