



2019 Futures Sessions Safety Check and Session Log

Head Coach _____ Date _____

Region _____ Site _____ Session # _____ Age _____

Safety Check List

Check the site prior to use and immediately post session. Always keep a copy of each session's Safety check List. It is for your records in case of an accident or any legal action that may be brought against yourself or USA Field Hockey.

Emergency Phone Number _____ Please make sure that your emergency cell phone has a signal in the facility you are using. If not, locate the nearest working phone.

Medical Person's Name _____ **Phone Number:** _____

Check the Following:

- Medical kit on site
- Ice on Site
- Athletes wearing mouth guards
- Athletes wearing shin guards
- Athletes wearing NO jewelry

Overall Evaluation of Practice area. Check visually noting any possible problems

Note any injuries of safety concerns

Session Summary

Did you complete the session curriculum? _____

Comment on Session Content
