Ontario Amateur Wrestling Association
103 – 1 Concorde Gate. Toronto, ON M3C 3N6
Telephone: (416) 426-7274
Web Site: http://www.oawa.ca E-mail: admin@oawa.ca

OAWA Pre-Event Inspection Procedures

Instructions to Head Official:

As you know, the event you have been assigned to has requested and was granted Sanctioning by the OAWA. As part of this process, the event must go through a pre-event Risk Management Check.

Prior to the start of your event, you are to conduct a pre-event walk through of the Facility using the accompanying two-page checklist.

We suggest you review and familiarize yourself with these forms prior to departing for the event, since some checks can be done (eg. outside parking lot, etc.) as you enter the venue.

Ideally, this walk through should be completed with the event Convenor so that any identified issues can be cleared up immediately. However, if this is not possible due to the Convenor being otherwise occupied on pre-event work, then as Head Official you are to conduct the walk-through yourself.

In either case, you are to bring any issues with respect to the Facility to the attention of the Convenor and these are to be cleared up immediately.

Important Note: As Head Official, you have the power designated from OAWA to delay the start of, pause competition in or shut down the event if any shortcoming is serious enough to warrant it. The event will remain shut down until the issue is addressed to your satisfaction.
Head Official and Convenor are to sign off on this report before the event begins.

Following the event: Keep a copy of this report, along with:

A copy of the weigh-in list or weight verification list.

Injury Reports (from First-aid staff) and Incident Reports (if applicable)

A complete copy of the event results.

A copy of the tournament draw/bracket sheets (if available).

Thank you for helping make Ontario Wrestling safer!

Ontario Amateur Wrestling Association
PRE-EVENT CHECKLIST:

Event Name: _____

Event Location: _____ Event Date: _____

CONVENOR'S NAME: _____

Have physical inspections of facilities and equipment been completed? ❑ Yes ❑ No

Do you have a "Facility Walk Through Check Sheet" completed and filed for each? ❑ Yes ❑ No

Have memberships been confirmed for all participants ❑ Yes ❑ No

Has Event First-aid coverage been secured? ❑ Yes ❑ No

List name of chief First-aid staff contact: _____

List First-aid staff and their background(s):

_____

List name of chief facility person _____

List name of Head Official _____

List name of Event Registration staff _____

Have injury forms been provided to First-aid personnel? ❑ Yes ❑ No

Does the chief First-aid staff person have access to phone for emergencies? ❑ Yes ❑ No

Has Head Official confirmed that all officials are up-to-date OAWA members? ❑ Yes ❑ No

Have all officials attended the pre-event clinic (if applicable)? ❑ Yes ❑ No

Are mats and equipment in good condition, well secured, and properly installed? ❑ Yes ❑ No

Have certificates of insurance been requested, if needed? ❑ Yes ❑ No

Other Comments (use reverse if necessary):

_____

_____

Signature of Event Convenor:_____ Date: _____

Signature of Head Official:_____ Date: _____

Ontario Amateur Wrestling Association
PRE-EVENT FACILITY WALK THROUGH CHECK SHEET

OUTSIDE:

Does the parking lot surface and/or drop off area appear adequate, well lit?
(if your activity will be held after dark) and free of any dark areas and potholes ❑ Yes ❑ No

INSIDE:

Are there any obvious trip and fall hazards? (i.e. torn carpet, wet floor in
Restrooms or elsewhere in the facility, poor lighting, non-highlighted steps) ❑ Yes ❑ No

Are all exits clear and well-marked with lighted signs? ❑ Yes ❑ No

Are the signs in working order? ❑ Yes ❑ No

Are all required exit doors unlocked? ❑ Yes ❑ No

What is the visible general condition of bleachers being used? ❑ Good ❑ Fair ❑Poor

Are the areas that your organization may require access to open? ❑ Yes ❑ No

Are areas that your organization will not require locked or otherwise secure? ❑ Yes ❑ No

Are dressing rooms clean, well lit, and secure? ❑ Yes ❑ No

Is the PA system in good working order? ❑ Yes ❑ No

Are restricted area, caution, etc. signs posted and visible if required? ❑ Yes ❑ No

Has all event set-up equipment been stored and secured properly away? ❑ Yes ❑ No

Indicate weight verification system used for event:

Random weight Checking ____
Full weigh-in ____
(check one to show which system is used)

MATS:

Are all competition surfaces/wrestling mats in good condition? ❑ Yes ❑ No

Have they been set up and secured properly? ❑ Yes ❑ No
Is there adequate protection space for competitors on each surface

and to ensure safe distance to spectators? ❑ Yes ❑ No

_____

_____

Signature of Event Convenor:_____Date: _____

Signature of Head Official:_____Date: _____