



**DICKY BEACH SLSC BBQ COMPLIANCE CHECK LIST
TEMPLATE No. 021**

Date:	Type of Event:
Event Location:	

NAME OF RESPONSIBLE PERSON	
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CLUB SERVICE

Have you read the Dicky Beach Surf Life Saving Procedure ADM013	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Do you understand your responsibilities regarding the service of alcohol	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you provided members who will be assisting in the service of alcohol with Dicky Beach Surf Life Saving Procedure ADM013	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Is there water available to members consuming alcohol	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Are the adequate policies/practices in place to exempt the service of alcohol to minors	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Do your assistants understand they must sight identification if they believe a person is under 18 years of age prior to providing them with alcohol	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Is the event area a safe environment	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Is your service area clean and in good repair	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Do you understand no alcohol should be provided to intoxicated persons	YES <input type="checkbox"/>	NO <input type="checkbox"/>

INCIDENTS <Please write here if any incidents or injuries occur during the function – please include the full name, membership type and pertinent detail.>