

WASA **GOAL INSPECTION** REPORT

Field Number: _____

Date of Inspection: _____ Time: _____

Goal secure with steel anchors: Y/N Any Missing: Y/N (should have at least one per side)

Did you report the anchors missing to the Ref Coordinator or In-house Director? Y/N

Any visible goal damage? Y/N If YES, describe damage: _____

Net secure: Y/N Any net damage? Y/N If YES, describe damage: _____

Did you find the goal in its normal spot? Y/N If not, where did you find it? _____

Ref Completing Inspection Name Printed: _____

Ref Signature: _____



WASA receipt date: _____
Facilities Manager notified: Y/N
Date: _____

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