



Home Meeting Safety and Health

This form should be completed annually for troops meeting in a private home.

Leader's Name _____ Troop Number _____

Address of troop meeting location _____

Name of homeowner/renter if other than leader listed above: _____

Safety and Health Checklist

- Does the home have working smoke detectors? Yes No
- Are firearms and ammunition kept under lock? Yes No
- Is there more than one clear exit out of the meeting area in case of fire (may be a window)? Yes No
- Are pets secured away from the meeting area and access to girls? Yes No
- Are steps and walkways clear of trip and fall hazards? Yes No
- Are toilets and handwashing facilities available? Yes No
- Is a first aid kit available? Yes No
- Is a telephone available and operational? Yes No
- Are chemical cleaning solutions and medications properly stored to prevent access? Yes No
- Is access restricted to sports equipment such as archery equipment, trampolines, darts, etc.? Yes No
- Are barriers or warnings provided for woodstoves and heaters? Yes No

Leader's Signature

Date

Adult Household Members' Information

Please list any other adults who might be present in the home during Girl Scout activities and have them complete the Background Check Authorization Form.

Name _____

Name _____