



### FIELD EVALUATION FORM

Field Name, Location and Number

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Field Dimensions (approximate) Length: \_\_\_\_\_ Width: \_\_\_\_\_

Playing Surface: Grass: \_\_\_\_\_ Artificial Turf: \_\_\_\_\_ Other: \_\_\_\_\_

Is the field lined properly: Yes \_\_\_\_\_ No \_\_\_\_\_

If no, please specify: \_\_\_\_\_

Field Condition Overall: Excellent \_\_\_\_\_ Good \_\_\_\_\_ Fair \_\_\_\_\_ Poor \_\_\_\_\_

Goal Area: Excellent \_\_\_\_\_ Good \_\_\_\_\_ Fair \_\_\_\_\_ Poor \_\_\_\_\_

Evidence of holes? \_\_\_\_\_ Filled? \_\_\_\_\_

Debris, rocks, glass and other impediments evident? \_\_\_\_\_ Removed? \_\_\_\_\_

Sprinkler heads protruding? Yes \_\_\_\_\_ No \_\_\_\_\_

Safe distance between playing surface and barriers or obstacles such as light towers, fencing, pavement? Yes \_\_\_\_\_ No \_\_\_\_\_

Field Moisture Standing or pooling water? Yes \_\_\_\_\_ No \_\_\_\_\_

Muddy areas: Many \_\_\_\_\_ A few \_\_\_\_\_ None \_\_\_\_\_

Goals Intact (no cracks, broken supports or fixtures) Yes \_\_\_\_\_ No \_\_\_\_\_

Goals properly placed and anchored (by adults only) Yes \_\_\_\_\_ No \_\_\_\_\_

Nets properly secured (by adults only) Yes \_\_\_\_\_ No \_\_\_\_\_

Facilities Easy access to restrooms? Yes \_\_\_\_\_ No \_\_\_\_\_

Easy access to drinking fountain? Yes \_\_\_\_\_ No \_\_\_\_\_

Is there adequate parking? Yes \_\_\_\_\_ No \_\_\_\_\_

Is there adequate spectator area? Yes \_\_\_\_\_ No \_\_\_\_\_

Lights Does the field have lights? Yes \_\_\_\_\_ No \_\_\_\_\_

Do all lights appear to be functioning properly? Yes \_\_\_\_\_ No \_\_\_\_\_

Any additional observations or comments regarding the condition of this field:

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Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_