**Club Development Programme – Application Form**

**Club Information:**

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| --- | --- |
| **Club Name:** |  |
| **Club Address:** | **Post Code:** |
| **Contact Name:** |  |
| **Contact Number:** |  |
| **Contact Email:** |  |
| **Club Website Address:** |  |
| **Number of Rinks/Greens:** |  |
| **Total Membership Figures:** |  | **Male** | **Female** | **Total** |
| **2017:** |  |  |  |
| **2018:** |  |  |  |
| **2019:** |  |  |  |
| **Affiliated:** | **Yes** [ ]  **No** [ ]  |
| **Affiliated to:** |  **Bowls England** [ ]  **EIBA** [ ]  |
| **Lease Length (If appropriate):** |  |

**Club Committee:**

|  |  |
| --- | --- |
| **Committee Member Name:** | **Role/Responsibilities:** |
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**Coaching and Volunteer Data:**

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| --- | --- | --- |
| **Coaching Awards:** | **Start Total** | **End Total** |
| *Coach Bowls Level One Coaches:* |  |  |
| *Coach Bowls Level Two Coaches:* |  |  |
| *Play Bowls Activator* |  |  |
| *Working with Disabled People in Bowls Module* |  |  |
| *Safeguarding in Bowls Time to Listen Course* |  |  |
| *EBCS Accredited Coaches*  |  |  |
| *Number of Club Volunteers excluding Committee* |  |  |

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| **In 500 words please explain why your club wants to be part of the Club Development Programme:***Please include Development Needs, Member Recruitment, Coaching, Marketing, Funding and any Challenges the club currently faces. Please also demonstrate how your club has a capacity for growth.* |

**Club Representative Name ……………………………………… Role ………………………………………………….**

**Club Representative Signature ………………………………… Date ………………………………………………….**