****

**Application Form**

**Prior to completing this form please read the accompanying guidance documents which outline the the key criteria for applications.**

Club Run places are limited and therefore will be allocated according to the key criteria and strength of applications. Please note only one application per club is submitted and should be submitted by a Head Coach, club officer or member of the club committee.

|  |
| --- |
| **CLUB DETAILS** |
| **Name of Club** |  |
| **County** |  |
| **CONTACT DETAILS - of the person completing the form & Head Coach/Coaching Coordinator if different** |
| **Name**  |  |
| **Your role within the club** |  |
| **Telephone Number** |  |
| **Email address** |  |
| **Name of Head Coach or Leader** |  |
| **Email address** |  |
| **CLUB MEMBERSHIP INFORMATION** |
| **Overall club membership size** |  |
| **\* No. of EA registered members** |  |
| **ABOUT YOUR CLUB**  |
| **Type of club***Describe your club, membership and ethos in one or two short sentences.* | *.*  |
| **Tell us about your club’s recent achievements or success stories.** *This could be anything from growth in membership to winning a team championship event or development of your club structure and coaching.* |  |
| **Please outline briefly your clubs training or coaching structure.***This could include number and type of sessions each week, ability groups, etc**If you have a preference for a day of the week you would like Club Run visits to take place, then please state.* |  |
| **ABOUT YOUR MEMBERS** |
| **What sorts of races or events do the club members take part in as a team?** *Please tick all that apply.* |

|  |  |
| --- | --- |
|  parkrun |  Cross-country |
|  Road races 5k to marathon |  Road-relays |
|  Ultra distance events |  Triathlons |
|  Multi-terrain events |  Track 3000-10,000 metres |
|  Hill or Fell Running races |  |

 |
| **Please tell us about the ability range of your members?***Please provide us with some information on the type of runners your club supports.* *Please note there are no right or wrong answers. This information will help us form a better picture about your club.* |

|  |  |  |
| --- | --- | --- |
|  | **Fastest group** | **Slowest group** |
| Eg. 5k | *15-17 mins* | *28-30 mins* |
| **5k** |  |  |
| **10k** |  |  |
| **Half-Marathon** |  |  |
| **Marathon** |  |  |

 |
| **ABOUT COMPETITION** |  |
| **In the last 12 months have your members taken part in any of the following:**1. England Athletics Rd Running Champs/Champions of the Road
2. England Masters Qualifiers or Representative events
3. Area or National Road Relays 4/6 or 6/12 stage
 | If ‘yes’ please state which ones (a), (b) or (c).If ‘no’ please state why. |
| **Does your club host any events of its own?** **Please state the name of the race(s), type & distance.**  |  |
| **Would your club volunteers be interested in attending a Gun to Tape workshop?** Gun to Tape workshops (2 ½ hours) are aimed at supporting event organisers either looking to put on an event for the first time or looking to develop an existing event. |  |
| **WHY YOUR CLUB?** |
| **Please tell us in no more than 250 words why you would like your club to take part in Club Run and what you hope to get out of it.** |  |
| **SIGNATURE**  |
| **If successful in our application to Club Run we will commit to the expectations set out in the guidance documents.** **Date:****Signed:** |

**Please send your completed application form to Tom Craggs** **tcraggs@englandathletics.org**