

## Facilities/Equipment Audit 2007/08

Club Name	(Please enter Yes/No or Qty 0 for all boxes)				
Contact Address	Please return to CEO by Nov 6 2007				
Contact Email					
Contact Mobile Phone					
Number of Members Juvenile Senior	Master Other Total				
Number of Coaches Ath Leader Level 1	Level 2 Other Total				
Names of large towns within 20 minute drive time					
Name/Address of Local National School					
Name/Address of Local Secondary school					
Name / Distance of Nearest Other Athletic Club					
Child Welfare Officer					
1 Club Development Plans					
Would you like to increase the number of members in your club in 2008        If Yes by how many members        Would you like to increase the number of coaches of your club        If Yes by how many Coaches      Ath Leader        Level 1	Yes No   Juvenile Other   Yes No   Level 2 Other				
2 What equipment does your club currently have in 2007 ( Please specify quantity)	Juvenile Junior Senior				
Hurdles					
Javelins					
Hammers					
Shots					
Discus					
Relay batons					
Starting blocks					
Athletic Leader Packs					
High Jump Standards and bar					
High jump mats					
Pole vault poles					
Pole vault Standards and bar					
Pole vault mats					
Other Please Specify					

3 For 2008 what extra/new (Please specify quantity) Hurdles Javelins Hammers Shots Discus Relay batons Starting blocks Athletic Leader Pack High Jump bar High Jump bar High jump mats Pole vault poles Pole vault bar Pole vault mats Other Please Specif	۲.S.	b need	Juvenile	Junior	Senior
Please confirm location w equipment will be securely <b>4 Please advise quantity o</b> Public announcement Notice board	/ stored	<b>as on site to organise a tra</b> Clock Measuring equipme		d compe	tition /meeting .
Starting pistols Other Please specify 5 Please advise what facil	ities your club has avail	Podium able on site at your norma	l club addr	ess/traini	ing location.
Track Clubhouse Gym Flood lights Other Please specify		Indoor warm up area Indoor running area Indoor field events a Off road car parking			
6 If your club has a track for structures are currently Grass surface All Weather surface Tartan surface Location/ Address of track	on site	ease advise track surface a Throwers Cage Long jump pit High Perimeter Fend	-	ermanen	t
7 Does your club have a c If yes , please advise wh		lub house.			
Heated Changing rooms Toilets Showers Other Please specify		Kitchen Committee Rooms Equipment Storage a	area		

8 Please advise what equipment your club has on site to maintain club grounds / facilities .

Tractor Edge strimn Other please			killer spray sprayer		
9 <b>Please adv</b>	se the ownership status of y	our facilities and equip Facil			Equipment
Owned by c	lub				
-	ocal community				
•	chool /VEC/ dept of education				
Owned by C					
-	ounty council				
Other Pleas	-				
	shared with other sports clues specify name of club /school	ubs/schools etc ?			
1 is vour clut	planning to apply to Dept o	f Sport for any		<b></b> ]	
major Capi	al projects over next five year	ars ?	Expected		Proposed Location
If Yes pleas	e advise facilities , year expect	to apply and location	Year of a	pplication	
Track					
Clubhouse					
Gym					
Flood lights					
Indoor warm					
Indoor runni	ng area				
Indoor field					
Off road car					
Throwers Ca	-				
Long jump p					
High Perime	Ū				·
Timing Equi					
Measuring E					
Equipment S	Storage				
NB Please a	dvise location of these new fa	cilities where appropriate	e		
<b>Completed</b>	by				
<b>Position</b>					
This informa	tion will be used to allocate the	e €400k Equipment Capi	itation Grant	received by Athletic	s Ireland in April 2007 from th
	rts .It will also be used as the b			-	
	mit completed applications A				
stal address	Mr Brendan Hackett		Email	ceo@athleticsire	land.ie
	CEO Athletics Ireland Unit 19 Northwood court Northwood Business Campu Santry Dublin 9	s	Fax	01 8421334	