**GLOUCESTERSHIRE COUNTY FOOTBALL LEAGUE**

**CLUB APPLICATION FORM**

Please answer **ALL** questions and provide **ALL** documentation in support of the application. If an application is received incomplete or with missing documentation the application **WILL NOT** be registered and the form and documentation will be returned. Please feel free to use a continuation sheet if you need to expand any of your answers.

**Refer to the official handbook for 2023 – 2024 to assist your application** (available on the website

www.countyleague.co.uk).

Completed forms to be returned by 31st January 2024.

1. Name of Club.
2. GFA affiliation number.
3. Name, address and postcode of ground.
4. Are you a Football Accredited Club.
5. **SECURITY OF TENURE** - Who owns the ground.
6. Please give the length of your agreement if you are tenants.
7. Is the Club under any obligation, written or verbal, to any other organisation by which it does not have sole control of its Management, Finances or Players.
8. **GROUND SHARE** **–** does your Club ground share with another sports/football club.
9. If so, name of club and league.
10. Has the club got exclusive use of the ground on match days.
11. **BOUNDARY OF THE GROUND** (not a formal requirement) - Is the ground fully enclosed by a permanent boundary.
12. **ACCESS AND PARKING** - Has the ground got good accessibility from the road.
13. Are there adequate parking facilities, please state approximate number of spaces.
14. **Clubhouse** (not compulsory) Is there a clubhouse open on match days.
15. **PITCH PERIMETER BARRIER** **-** Is there a perimeter pitch barrier on all four sides.
16. State type of construction.
17. **PITCH STANDARDS** – Pitch dimensions (metres)
18. Is the pitch natural grass.
19. What is the maximum slope in any direction.
20. Do the goalposts meet the required safety standards set out by the Football Association.
21. **TECHNICAL AREA** – Are there fixed trainers boxes in place.
22. What is the capacity of each box.
23. Are there marked technical areas (as defined in the guidance contained in the ‘Laws of the Game’ booklet).
24. **SECURE WALKWAY** - (not a requirement) – If one exists please give details of its position and structure.
25. **FLOODLIGHTING** - (not compulsory) – Does the Club have floodlights.
26. If yes please state Average lux reading \_\_\_\_\_ Maximum and minimum lux readings \_\_\_\_\_
27. **PUBLIC ADDRESS SYSTEM** - (not compulsory) - Is there a Public Address system.
28. **ENTRANCES** - (no requirement for fixed entry points) - Are there fixed entry points.
29. Are turnstiles installed (describe type).
30. **EXITS** – Are fixed exit points provided and how many.
31. **ADJOINING PITCHES** – Are there any adjoining pitches.
32. If yes, give number and type of pitches.
33. Distance of adjoining pitch(s) to the County League pitch (metres).
34. **SPECTATOR ACCOMMODATION** – Is there seated accommodation (not a requirement)\_\_\_\_\_, Is there covered standing accommodation (not a requirement)\_\_\_\_\_.
35. Hardstanding (not a requirement) – are there any hardstanding areas (minimum width 0.9m measured from the spectator side of the perimeter pitch barrier)\_\_\_\_\_, How many sides of the pitch can spectators view the game from\_\_\_\_\_.
36. **SPECTATOR TOILETS** – Location of facilities (distance from pitch – metres). Describe what facilities are provided.
37. **REFRESHMENT FACILITIES** - Is there a refreshment outlet for spectators.
38. **DISABLED FACILITIES** – State what is provided. A Club must be able to accommodate disabled spectators and be mindful of its obligations under the provisions of the Disability Discrimination Act 1995. Reference should be made to the publications/data sheets issued by both The Football Association and the Football Foundation.
39. **DRESSING ROOM FACILITIES** – **HOME TEAM** – size of changing area excluding shower/washing/toilet area (square metres)\_\_\_\_\_ , Number of showerheads\_\_\_\_\_, Number of urinals\_\_\_\_\_, Number of WCs\_\_\_\_\_, Number of wash hand basins\_\_\_\_\_ , Is there a treatment table\_\_\_\_\_, **AWAY TEAM** - size of changing area excluding shower/washing/toilet area (square metres)\_\_\_\_\_, Number of showerheads\_\_\_\_\_ ,Number of urinals\_\_\_\_\_, Number of WCs\_\_\_\_\_, Number of wash hand basins\_\_\_\_\_, Is there a treatment table\_\_\_\_\_. **MATCH OFFICIALS** - Size of changing area excluding shower/washing/toilet area (square metres)\_\_\_\_\_, Number of showerheads\_\_\_\_\_, Number of WCs\_\_\_\_\_, Number of wash hand basins\_\_\_\_\_, Is there separate changing accommodation for both **male and female** match officials\_\_\_\_\_.
40. **MEDICAL** – Is there adequate first aid equipment\_\_\_\_\_, Does the Club have a fully trained first aider in attendance on match days (minimum F.A. Save a Life)\_\_\_\_\_, Is there access for an ambulance to reach the pitch\_\_\_\_\_.
41. **GENERAL** – Does your Club comply with all legislation in respect of - Insurance other than compulsory Public Liability\_\_\_\_\_, Fire certificate for public building\_\_\_\_\_, Current certificates to cover the electrical/gas installations of the building\_\_\_\_\_, Do the changing facilities comply with the local statutory bodies regulations\_\_\_\_\_\_.

**IMPORTANT INFORMATION**

**The following items MUST accompany this form**

1. **Copy of the Club Constitution.**
2. **Copy of the latest Accounts and Balance sheet for the Club, as submitted to the most recent Annual General Meeting.**
3. **Copy of one statement of the Club bank account as officially issued by your bank (not more than 3 months old).**
4. **Evidence that the Club has written permission to play at the ground named on this form.**
5. **A copy of a valid certificate of any person(s) providing first aid (Minimum F.A. Save a Life).**

**All applications must be accompanied with a fee of £40 (non- refundable).**

**Bank transfer – Sort Code 60-01-29 Account number 50003666.**

**Cheques payable to Gloucestershire County Football League and sent to the Treasurer at 5, Charter Place, Worcester. WR1 3BX.**

**Failure to send the fee will render the application invalid.**

**If a Club is successful in their application, a further £20 entry fee will be payable.**

**Clubs with a senior team playing at a higher grade in the NLS may or may not require a ground inspection.**

**Signed by the Club Secretary : Print name :**

**Full postal address :**

**Contact home telephone number :**

**Contact mobile telephone number :**

**E mail address :**

**Date the document signed :**

**PLEASE RETURN THIS FORM BY E MAIL TO MARK SIMPSON by 31st JANUARY 2024**

**E mail address :** **gclfixtures@virginmedia.com**

**ALL CLUBS PLEASE ENSURE THAT YOUR PRESENT LEAGUE SECRETARY IS NOTIFIED OF THIS APPLICATION.**