** 2015 GAELIC4GIRLS**

 **Application form**

To register your Club’s interest and apply for the Gaelic4Girls 2015 programme, please complete this application form and return it to your **Provincial Development Officer** by **31st January 2015**

**Please Note – All sections must be completed or the application will not be accepted**

**Province**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Club Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**County**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Club contact for this application**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone**: (**Home**): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (**Mobile**): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**How long is your Ladies Football Club in existence?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Age Group** | **Total number of registered members** | **Number of mentors currently involved with the team(s)** |
| **Under 10** |  |  |
| **Under 12** |  |  |
| **Under 14** |  |  |
| **Under 16** |  |  |
| **Under 18** |  |  |
| **Adult** |  |  |
| **Non Players** |  | **N/A** |
| **Gaelic4Mothers & Others** |  |  |

|  |  |  |
| --- | --- | --- |
| **Name of Primary Schools in your area** | **Mixed/All Girls** | **Number of Girls aged 8 – 12 years** |
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| --- | --- | --- |
| **Name of Post Primary Schools in your area** | **Mixed/All Girls** | **Number of Girls** |
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| **Please give the top 3 reasons why your Club should be selected to host the Gaelic4Girls Programme in 2015?** |

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| **Please provide evidence to indicate that your Club has the sufficient resources to host the Gaelic4Girls Programme;** |
| ***Facilities:*** |
| ***Co-Ordinator:*** |
| ***Coaches (min. of 2 required):*** |
| ***Equipment:*** |

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please submit by post to Connacht Development Officer: Vinny Burke, 4 Sli na Misean, Carrownalurgan, Westport, Co. Mayo. Ph: 086 4133538 Email: connachtdev@gmail.com

**Please note that any applications received after the closing date (30th January 2015) will not be considered for the Gaelic4Girls programme this year.**