

# Ards and North Down SPORTS FORUM

2022-2023
Goldcard
Application Form



#### Section 1 - Personal Details

| Goodon i i oroonar                               | <b>D</b> ota |   |                   |                            |              |
|--|--------------|---|-------------------|----------------------------|--------------|
| Name   |              |   |                   |                            |              |
| Address  |              |   |                   |                            |              |
|  |              |   |                   |                            |              |
|  |              |   |                   | Postcode:                  |              |
| Telephone  |              | Home:   |                   | Mobile:                    |              |
| ·  |              |   |                   |                            |              |
| Date of Birth                                    |              |   |                   |                            |              |
| (if under 18)                                    |              |   |                   |                            |              |
| School/College/ University                       |              |   |                   |                            |              |
| attended   |              |   |                   |                            |              |
|  |              |   |                   |                            |              |
| Name for correspondence                          |              |   |                   |                            |              |
| Name for correspondence                          |              |   |                   |                            |              |
|  |              | (Please                                       | complete if diffe | erent than applicant)      |              |
| Address for correspondence                       |              | (Please complete if different than applicant) |                   |                            |              |
| Address for correspondence                       |              |   |                   |                            |              |
|  |              |   |                   | Postcode                   |              |
| Email address for corresponde                    | nce          |   |                   | 1 000000                   |              |
| Email address for corresponde                    | ,,,,,        |   |                   |                            |              |
| Section 2 – Sport                                |              |   |                   |                            |              |
| Which squad(s) are you curre                     |              |   |                   |                            |              |
| 111.4  | Plea         | ase tick                                      | Age/level e.g.    | Under 16, Senior Squad e   | etc.         |
| Ulster   |              |   |                   |                            |              |
| Northern Ireland                                 |              |   |                   |                            |              |
| Ireland  |              |   |                   |                            |              |
| Great Britain                                    |              |   |                   |                            |              |
| Other (please specify)                           |              |   |                   |                            |              |
|  |              |   |                   |                            |              |
| Please name the events you a                     | are tra      | ining for (                                   | successful Gol    | ld Card issued for first e | event may be |
| extended upon request)                           |              | - (-)   |                   | Marina                     |              |
| Name of Event(s)                                 | Date         | e(s)  |                   | Venue                      |              |
|  |              |   |                   |                            |              |
|  |              |   |                   |                            |              |
| Name the sports slub you are                     |              |   |                   |                            |              |
| Name the sports club you are                     |              |   |                   |                            |              |
| currently a member of Contact person within club |              |   |                   |                            |              |
| Name   |              |   |                   |                            |              |
| Contact Number                                   |              |   |                   |                            |              |
| Email  |              |   |                   |                            |              |
| Name of Governing Body                           |              |   |                   |                            |              |
| Contact person within the                        |              |   |                   |                            |              |
| Governing Body                                   |              |   |                   |                            |              |
| Name   |              |   |                   |                            |              |
| Contact Number                                   |              |   |                   |                            |              |
| Email  |              |   |                   |                            |              |





## **Section 3 – Training Facilities**

| What training facilities do you wish to use? (Please tick)   |     |       |           |         |  |          |      |          |       |          |  |
|--|-----|-------|-----------|---------|--|----------|------|----------|-------|----------|--|
| Gym  | He  | ealth |           | Pool    |  | Cryo Spa |      | Pitches  |       | Track    |  |
|  | Sı  | uite  |           |         |  | (Londond | erry |          |       |          |  |
|  |     |       |           |         |  | Park)    |      |          |       |          |  |
| Which training venue do you wish to use? (Please tick)       |     |       |           |         |  |          |      |          |       |          |  |
| Portaferry Sports Centre                                     |     |       |           |         |  |          |      |          |       |          |  |
| Comber Leisure Centre  |     |       |           |         |  |          |      |          |       |          |  |
| Ards Blair Mayne Wellbeing & Leisure Complex                 |     |       |           |         |  |          |      |          |       |          |  |
| Londonderry Park   |     |       |           |         |  |          |      |          |       |          |  |
| Aurora Aquatic and Leisure Complex (Bangor)                  |     |       |           |         |  |          |      |          |       |          |  |
| Bangor Sportsplex  |     |       |           |         |  |          |      |          |       |          |  |
| Queen's Leisure Centre (Holywood)                            |     |       |           |         |  |          |      |          |       |          |  |
| How often do you wish to use these facilities? (Please tick) |     |       |           |         |  |          |      |          |       |          |  |
| Daily  |     |       | Weekly    |         |  |          |      | Other (p | lease | specify) |  |
| 2 – 3 tir  | mes |       | Less fred | quently |  |          |      |          |       |          |  |
| per wee  | ek  |       |           |         |  |          |      |          |       |          |  |
|  |     |       |           |         |  |          |      |          |       |          |  |

## Section 4 – Funding

| Are you receiving funding assistance from any other source? (Please tick) |                         |                              |  |  |  |  |
|---|-------------------------|------------------------------|--|--|--|--|
| Yes   | No                      |                              |  |  |  |  |
|   |                         |                              |  |  |  |  |
| If yes, please provide information below                                  |                         |                              |  |  |  |  |
| Name of   | Nature of Assistance    | Duration of Assistance       |  |  |  |  |
| organisation/funding  | E.g. amount of funding, | E.g. one off payment, 3 year |  |  |  |  |
| body providing  | facility use            | agreement                    |  |  |  |  |
| assistance  |                         |                              |  |  |  |  |
|   |                         |                              |  |  |  |  |
|   |                         |                              |  |  |  |  |
|   |                         |                              |  |  |  |  |
|   |                         |                              |  |  |  |  |
|   |                         |                              |  |  |  |  |
|   |                         |                              |  |  |  |  |
|   |                         |                              |  |  |  |  |
|   |                         |                              |  |  |  |  |
|   |                         |                              |  |  |  |  |

#### **Section 5 – Document Checklist**

## Please ensure the following documents are attached to your application

| Document required                           | Attached |
|---|----------|
| Letter of selection/qualification for event |          |
| '   |          |
| Evidence of ranking or squad selection      |          |





#### Section 6 – Declaration

I declare to the best of my knowledge the information provided within this application is correct.

I declare I am of amateur status and am a member of a recognised elite squad or am ranked within the Top 10 in Northern Ireland for my sport.

I declare that I will complete a Grant Report Form after my event and will acknowledge the funders in all publicity.

I declare that the Council will be notified immediately of any additional finding not declared in this application.

I am willing to support the Council, promote specific sports events/schemes during the lifespan of the Goldcard, if requested to do so.

| Signed: | Date: |  |
|---------|-------|--|
|         |       |  |

(to be signed by parent/guardian for applicant under 18 years)

Once completed, please send the application along with the required documentation to the following address:

Ards and North Down Sports Forum Sports Development Ards and North Down Borough Council Londonderry Park Portaferry Road BT23 8SG

Or by email: sportsdevelopment@ardsandnorthdown.gov.uk

#### **DATA PROTECTION**

Ards and North Down Borough Council values your right to personal privacy. We at all times try to be open about the reasons why we collect, hold and use your personal information. We collect information about you in order to fulfil our statutory obligations and provide you and other people with services. Some of the information we gather may be used to help us provide you with improved services. We at all times aim to comply with the Data Protection Principles, ensuring that information is collected fairly and lawfully, is accurate, adequate, up to date and not held any longer than necessary. If your personal data needs to be used for purposes other than those mentioned, we will contact you to seek your consent. You have a right to see information held about you (with a few exceptions allowed for in the Data Protection Act 1998). If you wish to see any personal information held on you please put your request in writing, stating clearly who you are and what information you would like to see to the address below. A fee is chargeable up to £10.00 which covers the cost of gathering, copying and redacting the data.





#### Freedom of Information

Ards and North Down Borough Council is subject to the provisions of the Freedom of Information (FOI) Act 2000 and Environmental Information Regulations (EIR) 2004. Applicants should be aware that the information provided in the completed application document could be disclosed in response to a request under the FOI Act or EIR.

The Council will proceed on the basis of disclosure unless an appropriate exemption applies. No information provided by applicants will be accepted "in confidence" and Ards and North Down Borough Council will not accept liability for loss as a result of any information disclosed in response to a request under the FOI Act or EIR.

Ards and North Down Borough Council does not have a discretion regarding whether or not to disclose information in response to a request under the FOI Act or EIR, unless an exemption applies. Decisions in relation to disclosure will be taken by appropriate individuals in Ards and North Down Borough Council having due regard to the exemptions available and the Public Interest. Applicants should be aware that despite the availability of some exemptions, information may still be disclosed if the Public Interest in its disclosure outweighs the Public Interest in maintaining the exemption. Applicants are required to highlight information included in the application documents which they consider to be commercially sensitive or confidential in nature, and should state the precise reasons, why that view is taken. In particular, issues concerning trade secrets and commercial sensitivity should be highlighted. Applicants are advised against recording unnecessary information.

In accordance with the Lord Chancellors Code of Practice on the discharge of public functions, Ards and North Down Borough Council will **not** accept any contractual term that purports to restrict the disclosure of information held by the Council in respect of the contract or grant process save as permitted by the FOI Act or EIR. The decision whether to disclose information rests solely with Ards and North Down Borough Council.

Ards and North Down Borough Council will consult with applicants, where it is considered appropriate, in relation to the release of information.

