## **Gulf Swimming - Club Assessment Questionnaire**

Given current circumstances, Gulf would like to gauge status of clubs so we can HELP! Please complete this questionnaire AS SOON AS POSSIBLE. **Responses will be STRICTLY CONFIDENTIAL.**

**Send completed information to: julie.bachman@gulfswimming.org**

**TEAM INFORMATION:**

* Club name:
* Your name:
* Your position with the club:
* Your email address:
* Your phone number:
* What is your club’s organization status (501 c3/parent-governed, coach-owned, institution/corporate owned)?
* Number of fulltime coaches on staff:
* Number of part-time coaches on staff:

**TEAM FINANCIAL HEALTH**

* How many months of reserves do you currently have?
* Have you closed all your club programming at this time? If not, what is being provided?
* What is the financial plan for the team for the next 30 days, 60 days, 90 days should this crisis continue?
* What financial commitments do you still have while regular swim operations are paused?
* Do you have a swim school that is also affected by the pause?
* Have you convened your Board of Directors to discuss your financial plans and any necessary bylaw changes?
* What is team refund / deferment policies?
* What have you done so far to mitigate the effects of this operational pause?
* Have you had to stop paying your employees/coaches?

**TEAM COMMUNICATIONS**

* How and how often are you communicating with your members?
* What are the most frequently asked questions that you cannot answer?
* Do you have a link on your website for updates to your membership- what is the URL?

**MEMBERSHIP STATISTICS**

* How many members do you currently have registered?
* How many members did you have registered this time last year?
* How many members do you anticipate having at this time next year?

**CONCLUSION**

* What help do you need from your LSC?
* What are you doing to continue the sense of Family and/or Team Culture that sets your team apart from other youth activities?
* Do you have any other comments?

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