

## QUESTIONNAIRE

				Survey	Date:			
		CLUE	DETAILS					
Club Name:			Contact Name:					
Email:			Survey Team:					
Club Address:								
No. of club members:	No. of pi	tches:	No. of buildings:			No. of teams:		
Does your club have a stand?	Yes	Yes No Does your clu		club have a ch	anging area?	Yes	No	
Does your club have a canteen?	Yes	No	Does your	club have offic	ces?	Yes	No	
Other?								
WASTE MANAGEMENT DETAILS								
Who is the Waste Management	Service Pr	ovider?						
How many wheelie bins are provided? Large 1100ltr Small 240 ltr Other								
Prior to participation in this programme, did you quantify or record waste? Yes No								
How many bins are located within the club grounds:  How many bins have signa							ve signage:	
How many bins are designated for: Recycling Food General								
If recycling bins are provided, are they used correctly? Yes No Unsure								
What are the most common waste items: (please tick all relevant options)								
Plastic Bottles Disposable Coffee Cups Crisp Bags Fruit Other  If you use bags to line your bins or collect waste, what colour do you use? Black Clear Other N\A								
OTHER TYPES OF WASTE								
How do you dispose of glass?								
How do you dispose of light bulb	os, batterie	es, paint, aeroso	ls etc?					
		KEY CH	HALLENGE	:S				
Are there any problem areas wit	hin you cl	ub grounds?						
What are the key waste issues/challenges your club wishes to address?								
Are facilities used by any externa	al organisa	ations?						