

RECRUITMENT PLANNER

Club Details

CLUB DETAILS				
Name				
Club ABN	N			
CONTACT Club Presic	CT PERSON/S sident			
Name				
Phone	Email			
Aussie Tee	ee Ball Coordinator			
Name				
Phone	Email			
Other Repr	presentative (If applicable)			
Name				
Phone	Email			

Local Schools

School Name	Public/Private	Contact Name	Contact Info

TARGET AGE GROUP(S)

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Note: Year Levels 1-4 have the highest conversion rate.

Options for School Clinics

SPORTING SCHOOLS

Government funded.
School applies for the grant,
buys equipment
and facilitates delivery
(including staff)

BQ 5 FREE DAYS

You organise, BQ staff it. Club organises with the school. BQ sends a qualified Development Officer.

Organise with Dan Spiers daniel@baseballqld.asn.au

DIY CLINICS

You do it all.
Club is responsible for
organising and staffing,
ncluding providing equipment.

BQ have equipment kits available for hire.



GROWTH STRATEGIES

What will you use?

What growth strategies will you implement? (i.e. School clinics, social media marketing, newspaper article, shopping centre stands, etc.)

1	
2	
3	
4	
5	
Hov	w will these strategies be implemented? (Contact schools and coordinate with Dan, cate responsibilities to volunteers, create assets)

1	
2	
3	
4	
5	

Club-Member Involvement & Responsibilities

Who will be responsible for assisting in the running of this program from the club and what will the roles be?

Name	Responsibility	

Resources

What resources does the club need to effectively complete this recruitment plan? e.g. Source - Club, BQ, etc. - Name of Resource - Policy, Equipment Kit, Social Media tiles etc.

Source	Name of Resource	



BUDGETING

Determine your budget, funding sources, income and expense

Income (e.g. Registration, Sponsorship, Grants, etc.)

	Amount
Total Amount:	
	Total Amount:

Expenditure (e.g. Social Media Ads, Equipment, etc.)

Source of Funding		Amount
	Total Amount:	

Define your Fees

What will you charge for the upcoming season?

You'll want to lock in your fees as early as possible, so the information can be passed onto members.

Age Group	Fee	Weekly Cost
U8		
U10		
U12		
U14		
U16		
U18		



KEY MILESTONES

Define your timeline

Example

Activity	Timeline/Date
Appoint Coordinator	May 20
Confirm school involvement	June 11
Start Social Media Ads	August 1
Come and Try Days	August 12, 19, 26

Timeline/Date

Desired Outcomes

What are your other goals?	



DECLARATION

By signing this form, the club certifies that:

- 1. The club will provide Baseball Queensland with a final report and documentation defining attendance numbers for the club Gala / Come and Try day(s) and final membership capture within the Teeball and Rookie ball age groups.
- 2. This plan has the full support of the club committee.
- 3. The club will provide the following:
- A. Database of every school attended including the following details:

School name.

Number of sessions run.

The age groups that were targeted/participated.

Number of participants per class.

B. Database of every new registration in the club, derived from the program, including:

Name

Address

Gender

Age group

4. The club will support the program by providing the following:

A program coordinator.

Volunteers to assist with school clinics (where possible).

An event (sign-on day, gala day etc.) linked to any promotional school activities.

A junior coaching director to ensure the clubs ability to cope with expected increases in junior numbers.

SIGNATURES

Club President		
Club Secretary		
Coordinator		

ONCE COMPLETE:

Upon completion of this form, please send through to our Game Development Manager.

Daniel Spiers daniel@baseballqld.asn.au