



CLUB PROFILE

Registration Date	
State Electorate QLD here	

SEIFA Score here	
Club Unique ID	
Primary CPD	

Club Details ([here](#))

State:	
Division:	
Zone:	
League:	
Colloquial Club name:	
Official Club name:	
Club Address / Oval:	

Club Contacts (must be two | if writing does not fit, reduce the font size)

Primary	Full Name:		Club position:	
	Phone:		Email:	
Secondary	Full Name:		Club position:	
	Phone:		Email:	

Club Communication Details

How does your club communicate its messages to Club Administrators, Coaches, Managers and other staff?

(Check all boxes that apply)

Facebook	Group Chat	Text Message	Phone call	Other (specify)
☐	☐	☐	☐	
When is a good time of year to hold a Session? Why? (eg AGM, carnival)				

Local mental health providers and contact details:

Name	Contact details
1.	
2.	
3.	

Issues and Demographic profile of the club and its community

Has your club experienced any mental health issues or suicides?	Yes ☐	No ☐
Please expand:		
What percentage of the community are:		
Caucasian	Aboriginal & Torres Strait Islander	Disadvantaged (specify)

* Send a completed copy of this form to State of Mind Admin Staff