



PITCH SUPPORT NETWORK (PSN) EXPRESSION OF INTEREST FORM

| Section 1: Club/Organisation Details | | |
|---|--|--|
| Name | | |
| Address | | |
| Town/City | | |
| Post Code | | |
| Project Site (if different to above) | | |
| Address | | |
| Town/City | | |
| Post Code | | |
| Tenure of Project Site | Please select one from the following: | Freehold / Leasehold / Rental |
| Years remaining (Leasehold/Rental) | | |
| Has the current year's affiliation been paid to Middlesex Cricket? | Yes / No | |
| Section 2: Your Contact Details | | |
| Your name | | |
| Club role/position | | |
| Email address & contact number | | |
| Section 3: Project Information | | |
| Project description (max 30 words) | | |
| Project timescale/urgency | | |
| Cricket played on-site (Please highlight all that apply and specify Saturday divisions where applicable) | Middlesex County League Middlesex Championship League Middlesex 1987 League Middlesex Colts Association (U10-U17) Middlesex Development League (U21+) Other (please specify) | Yes / No Yes / No Yes / No Yes / No Yes / No |
| Project need (max 100 words) | | |