

FORDINGBRIDGE TOWN COUNCIL
APPLICATION FOR GRANT AID/CIL APPLICATION

NAME OF ORGANISATION	
Registered Charity Number (if applicable)	
Contact Name	
Address	
Telephone Number	
Email address	
Web address	
Function of Organisation	
What, if any, similar facilities exist in or near the locality served?	
Total Number of Users: Total Number of Members living in Parish:	
Number of Members under 18: Number of Members under 18 living in Parish:	
Purpose of Grant:	
Total Cost of Facility for which Grant required:	
Amount of Grant requested: (Please state in £)	
Date Grant required:	
Amount which you are able to put forward from your own resources:	

Cont....

Fordingbridge Town Council Grant Form

What is the Annual Subscription? Has this been increased recently or are there any proposals to increase the subscription?	
Are any of the organisers/helpers paid. If so, please give amounts paid:	
Has any application been made to any other body? If so, please give name, amount, date applied for and whether this was successful.	
Details of other grants received over the past five years	
Details of other fundraising activities	
Is there any further relevant information you can add in support of your application to assist the Council's decision?	

DECLARATION

I declare that to the best of my knowledge the information given is correct

Signed.....Date.....

Position in Organisation.....

NOTE: A copy of the most recent accounts or financial statement must accompany this application.

Please return the completed form to:-

The Town Clerk,
Fordingbridge Town Council,
The Town Hall,
63 High Street,
Fordingbridge,
SP6 IAS