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| **Grant Application Form for Barkham Parish Council** |
|  |  |  |  |
| Date of Application |   |
|  |  |  |  |
| **BUSINESS DETAILS** |
|   |
| Business Name: |   |
|  |
| Business Address: |   |
|  |
|   |   |
|  |
| Postcode: |   | Telephone No: |   |
|  |
| Email Address: |   |
|  |
| Web Address: |   |
|  |  |  |  |
| Is this a Charity? |  Y / N | Charity No. |   |
|   |   |   |   |
| **APPLICANT DETAILS** |
|   |
|  Applicant Name: |   |
|  |
| Correspondence Address: |   |
|  |
|   |   |
|  |
| Postcode: |   | Telephone No: |   |
|  |
| Email Address: |   |
|  |  |  |  |
| **GRANT REQUEST DETAILS** |
|  |  |  |  |
| For what purpose or project is the grant requested: |
|  |
|  |
|  |  |  |  |
| Who Will Benefit from the grant and how? |
|  |
|   |
|  |  |  |  |
| If your organisation supplies a service, please supply details of the number of Barkham Residents that use your services and your costs for providing these services. |
|  |
|   |
|  |  |  | Continued overleaf… |
|  |  |  |  |
| Amount of Grant requested: |   |
|  |  |  |  |
|  |  |  |  |
| To better understand your needs please provide a brief description, with supporting figures, of your operational costs, funding sources and a justification for the donation you are seeking in this application. The quality of this information will influence our level of support. |
|  |  |  |  |
|  |
|  |  |  |  |
| Please attach other supporting information or continue on a separate sheet. |  |
|  |  |  |  |
|  |  |  |  |
| **Declaration** |  |  |  |
|  |  |  |  |
| I apply for grant aid on behalf of  |  |
|  |  |  |  |
| **I declare that:** |  |  |  |
|  |  |  |  |
| I undertake, on behalf of the organisation, that any grant (or part thereof that Barkham Parish Council may determine) will be repaid if: |
|  |  |  |  |
| \* The grant is not used for the purpose(s) for which it was awarded. |  |
|  |  |  |  |
| Signed |  |  Date |  |
|  |  |  |  |
| Name |  | Position |  |
|  |  |  |  |
| If your application is successful, please indicate the name a cheque should be payable to, or provide bank details for electronic payment |
|  |  |  |  |
| Cheque Name: |  | **OR:** |
|  |  |  |  |
| Sort Code |  | Account Number |  |
|  |  |  |  |
| Please return this form and any other supporting information, to: |  |
| **Barkham Parish CouncilArborfield Green Community Centre,ArborfieldRG2 9ND** |
| Or email a copy of the signed form and any other supporting documentation to: |
| **Clerk@barkham-parishcouncil.org.uk** |