



Much Wenlock Town Council

Corn Exchange
Much Wenlock
Shropshire
TF13 6AE
01952 727509

admin@muchwenlock-tc.gov.uk
www.muchwenlock-tc.gov.uk

GRANT APPLICATION FORM

This application form is designed for voluntary or charitable organisations. The Town Council is ruled by statute and will only give financial assistance that will promote and/or improve environmental, social and economic well-being.

For assistance with the completion of this form, please refer to the guidance notes that accompany each question.

1. Name of Applicant

This should be the name of your group, organisation, school or your project

2 Main Contact for this application

This should be the person who manages your organisation or its finances

Name

3 Position of applicant in the body to which the application is for

4 Main contact address of body

| | |
|----------------------|-----------|
| <input type="text"/> | |
| <input type="text"/> | |
| <input type="text"/> | |
| <input type="text"/> | Post Code |

5 Telephone

6 Fax

7 e-mail

8 Location of where your body meets

Give the address where you meet to carry out the activities of the group, organisation, school or project

| | |
|--|-----------|
| | |
| | |
| | |
| | POST CODE |

9 Details of your body

Briefly describe the activities and aims of your body or project

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10 Status

Is your organisation a registered charity? YES ☐ NO ☐

If you answered yes, what is the registered charity number?

11 Beneficiaries

Give brief details of the people who will benefit from your activities

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12 National Bodies

If you are related or belong to or if you are working in partnership with a larger organisation, please state which one

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13 Other Funders

The Town Council may not be able to meet your entire request. Please list other bodies that you have applied to for funding and the amount

| Funding body | Amount £ |
|--------------|-------------|
| | |
| | |
| | |

14 Reason for Grant

Please describe the reason for the grant

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15 Amount required

£

16 Financial Status

Please supply details of your most recent Annual Accounts. If the organisation does not prepare annual accounts, copies of the bank statements covering the last six months must be enclosed. (We regret that a grant will not be considered without this information.)

| | | | | | | | | | | | | |
|------------------|--|--|--|--|--|--|--|--|--|--|--|---|
| Year ending | <table border="1" style="display: inline-table; width: 100px; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | | | | | | £ |
| | | | | | | | | | | | | |
| | day month year | | | | | | | | | | | |
| Income | | | | | | | | | | | | |
| less Expenditure | | | | | | | | | | | | |
| Profit/Loss | | | | | | | | | | | | |
| add Savings | | | | | | | | | | | | |
| Balance | | | | | | | | | | | | |

17 Payee/Bank Details

If your application is successful, please state to whom the grant should be made payable and provide bank details.

PAYMENTS CANNOT BE MADE PAYABLE TO INDIVIDUALS

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18 Signature of main contact or authorised signatory

| | |
|--------|---|
| Signed | <hr style="border: none; border-top: 1px solid black; width: 550px; margin: 5px 0;"/> |
| Date | <hr style="border: none; border-top: 1px solid black; width: 550px; margin: 5px 0;"/> |

19 Contract

I confirm that the body named on this application has authorised me to sign this agreement and to act on their behalf.

I certify that to the best of my knowledge, the information given in this application is true and accurate.

We agree to use the grant only for the purpose set out at 14 above.

If requested we shall supply the Town Council with details of expenditure incurred and shall keep and make available to the Town Council, all financial records and accounts, including receipts for items purchased with this grant, for a period of up to two years.

We shall acknowledge this grant in our annual accounts and any promotional publicity related to the supported activity will acknowledge the contribution from the Town Council.

We shall spend this grant within one year of the date of the payment and we undertake to seek the Town Council's agreement if we wish to use the funding for purposes other than stated in this application.

The Town Council reserves the right to ask for repayment of the grant in the following circumstances:

- if we breach this contract
- if we have submitted any dishonest or misleading information on this application
- if the grant is not spent within twelve months of receipt
- if we cease to exist, become insolvent, go into administration, receivership or liquidation.

We agree to these terms and conditions until the grant is spent in full.

| | |
|----------|-------|
| Name | _____ |
| Position | _____ |
| Signed | _____ |
| Date | _____ |

Please return this completed form to:

*Diane Barlow
Much Wenlock Town Council
The Corn Exchange
Much Wenlock
Shropshire
TF13 6AE*

Closing date for applications is 30 September. Applications received after this date will not be considered until the next financial year.