

## GRANT APPLICATION FORM 2019-2020

Shinfield Parish Council offers a limited number of grants each year to organisations, clubs and charities which provide a service in the parish to its residents. Grants are generally awarded at the beginning of the financial year, although late applications may be considered.

All grant applications must be made using this form. Applicants must read the criteria and conditions carefully and supply the relevant information. The outcome will be notified in writing and in certain circumstances the grant may only be awarded if specific conditions are met. There is no appeal process if an application is turned down.

Please complete all sections of this form. You may expand the boxes if necessary.

Name of Organisation:

WELCOME CLUB

Grant request from Shinfield Parish Council: £ 350/-

For what purpose is the grant to be used? How will it benefit the residents of Shinfield Parish?

RENT, WE RUN A LUNCH CLUB FROM 12-45 - 14-45 PM FOR 30 PEOPLE, WHICH BENEFITS VULNERABLE ELDERLY PEOPLE IN THE COMMUNITY + SOMEWHERE FOR THEM TO COME & MEET OTHER PEOPLE.

Have you applied to any other organisation for funding for all or part of this project/expenditure? If so, which organisation, and how much?

NO

About your Organisation :

Briefly describe the role of your organisation within Shinfield Parish WE PROVIDE A LIGHT 3 COURSE LUNCH FOR OUR MEMBERS + ENABLES THEM TO COME & MEET OTHER PEOPLE

Where are you based? SHINFIELD PARISH HALL

Number of members in your organisation? 30

Contact for this application:

Title: MISS

First name: IRIS

Surname: ORCHARD

Position held in organisation:

SECRETARY

Contact address 94, CHESTNUT CRESCENT, SHINFIELD READING RG2 9HA

Postcode: RG2 9HA

Telephone Number: 0118 3278381 / 07532719472

Email address: irisorchard@yahoo.co.uk

# DECLARATION

The following declaration must be completed by a senior contact  
on behalf of the applicant organisation.

I apply for grant aid on behalf of: Welcome Club

I declare that:

- the organisation named in this application form has authorised me to sign this application on their behalf;
- I have noted the conditions under which grants are awarded by Shinfield Parish Council;
- I confirm that if successful, I and the organisation which I represent, will abide by the conditions.

I undertake, on behalf of the organisation, any grant or such part as Shinfield Parish Council may determine, will be repaid if:

- The organisation is found to be in breach of the conditions applied to the grant;
- The grant ceases to be used for the purpose(s) for which it was given.

I certify that the information given in this application is true and confirm that the enclosures are current, accurate and adopted or approved by our organisation.

Signed: B. Orchard

Date: 30/9/19

Name: (Block capitals): \_\_\_\_\_

Position in organisation: \_\_\_\_\_

Additional information required (please tick the box if included with your application)

Accounts	
Balance Sheet	
Annual report (if available) /Financial Statement	
Other	