



WOBBURN SANDS TOWN COUNCIL

APPLICATION FOR COMMUNITY GRANT

SECTION 1 - Details of the Organisation

Name of your Organisation/Group:	
What are the aims and objectives of your Organisation/Group:	
Address of Organisation/Group:	
Contact name, address, telephone number and email address:	
Bank Account Details (Name of Banker, and Account Number):	
Bank Account Name	

Please provide a copy of your constitution	
Please provide details of your last year's accounts	
How many people does your group support? WSTC would like to know how many people would benefit from this funding	

SECTION 2 - Application details

Please describe the project for which you are seeking a community grant:	
Please state the total cost of your project: Please provide a detailed budget:	
Please state the size of grant you would like:	
Please indicate how you intend to fund the balance of your project:	
Have you had any previous grant from Woburn Sands Town Council? Please state how much and when received.	

SECTION 3 – Approval by Applicant

I(insert name)
being the(insert position)
of(the organisation)
hereby apply for a grant of the amount in Section 2 above.
I conform that the information given in this application is correct.

Signed Date

After completion, please return by post or e-mail:

Alison Jordan
Town Clerk
Woburn Sands Town Council
Memorial Hall
4 High Street
Woburn sands
MK17 8RH clerk@woburnsandstowncouncil.gov.uk

Tel: 01908 585368

For Parish Council use only

Decision

Date of Council Meeting.....Minute No