WOBURN 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 Bank Sort Code: Account Number:	
Please provide a copy of your constitution	

Please provide details of your most recent financial statements, including your annual budgets	
Please tell us how many people your group supports, as Woburn Sands Town Council would like to know how many individuals would benefit from this funding opportunity.	

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:	
Value of the grant you are applying for:	
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)

I hereby apply for a grant of the amount in Section 2 above.

I confirm that the information given in this application is correct.

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

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

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

Tel: 01908 585368

For Town Council use only

Decision .....

Date of Council Meeting..... Minute No .....