



ALNWICK TOWN COUNCIL

Room 5,
27 Fenkle Street
Alnwick
Northumberland NE66 1HW

Grant Application Form

YOUR GROUP/ORGANISATION DETAILS

YEAR: 2017

| 1. Name of person(s) making application | 2. Name of Group/Organisation |
|--|-------------------------------|
| | |
| 3. Position Held in Group/Organisation: | |
| Address: | |
| Tel: | |
| E-mail: | Web: |
| 4. Please give a brief description of your group / organisation. (Include details of where the group / organisation are based and geographical area covered, the number of volunteers you have and the number of the people you support each year) | |

| | |
|---|--|
| <p>5. Why is this grant required and how much is requested?</p> <p>(Please give information on what the grant would be spent)</p> | |
| <p>6. If you received a Town Council grant in 2016/17, provide information how the grant was spent?</p> <p>(Please give as much detail as possible as this will help to assess this application)</p> | |
| <p>7. Please provide any other information that you feel is relevant to this grant application (continue on additional sheets if necessary).</p> | |
| <p>8. Please demonstrate sound financial management by <u>submitting</u> details of all significant income and outgoings for your last financial year (this could include recent accounts, audited or otherwise, and/or other financial statements).</p> | |

SIGNATURE: _____

NAME _____

DATE: _____

Please return form to:

**Bill Batey, Chief Officer and Town Clerk,
Alnwick Town Council, Room 5, 27 Fenkle Street, Alnwick NE66 1HW.**

Before 5pm on 1st December 2017.

If you have any queries please contact Bill Batey alnwicktownclerk@btconnect.com Tel 01665 602574

Your application will be considered at our Finance & Policy Committee during December 2017