



WITNEY TOWN COUNCIL

Grant-aid to Local Organisations APPLICATION FORM

(PLEASE COMPLETE THE FORM IN BLOCK CAPITALS)

(1) Your Organisation			
Name of Organisation		WITNEY TALKING NEWS	
Registered Address*			
Post Code		Tel No.	
Contact Name		BYRON RUSSELL	
Position in Organisation		PUBLICITY OFFICER / TRUSTEE <small>(i.e. Chairman, Treasurer, Secretary)</small>	
Registered Charity		<input checked="" type="radio"/> YES / <input type="radio"/> NO	Registration No. 277434
<p>What are the activities and/or aims of the organisation: WITNEY TALKING NEWS (WTN.ORG) HAS PROVIDED A WEEKLY SPOKEN NEWS RECORDING FOR THE LOCAL BLIND / VISUALLY IMPAIRED COMMUNITY, AND THOSE WHO CANNOT HOLD OR READ A NEWSPAPER. RECORDINGS ARE AVAILABLE ONLINE AND (FOR THOSE WITHOUT A COMPUTER OR INTERNET) VIA A USB STICK AND PLAYER; THESE ARE SUPPLIED FREE OF CHARGE, AND POSTAGE COSTS (FOR THE WEEKLY USB-STICK RECORDING) ARE COVERED BY ROYAL MAIL. WE WERE ESTABLISHED 40 YEARS AGO AND ARE ENTIRELY RUN BY VOLUNTEERS, WHO PROFESSIONALLY RECORD THE PROGRAMMES + ADMINISTER THE SERVICE.</p>			
(2) Membership			
How many members do you have?		58 (UNKNOWN AVERAGE 98 REGULAR LISTENERS ONLINE)	
Approximately how many of your members live in Witney?		APPROX 30;	
Is membership restricted in any way?		USE OF THE FREE POSTAL SERVICE IS RESTRICTED TO REGISTERED BLIND MEMBERS	
What is your annual subscription, if any?		NONE	
Are you affiliated to a national organisation? If so, which one?		TALKING NEWS FEDERATION	
Local venue/meeting place		METHODIST CHURCH WITNEY (RECORDINGS)	

(3) Grants

Purpose for which the grant is required:

- NEW POSTERS + PUBLICITY MATERIALS TO RAISE AWARENESS
- NEW RECORDING + EDITING SOFTWARE

Amount of grant applied for

£ 500 - 00

Has your organisation previously applied to the Town Council for a grant?

~~YES~~/NO

If YES please give details

Have you applied for a grant to any other body or organisation?

YES/NO

If YES please give details

BARTETT TAYLOR TRUST
WITNEY TOWN CHARITY
BRIAN CRAWFORD TRUST

(4) Financial

Please enclose a copy of your latest audited accounts, a financial projection for the period following the balance sheet or a Business Plan if a new organisation.

(5) Fundraising

What fundraising events or activities will your organisation be holding this year?

NONE PLANNED, AS YET

(6) General

Recipients of a grant from the Town Council should acknowledge the fact on all relevant literature.

Please provide or attach any additional information which may assist the Council in reaching its decision.

I certify that the above information is true to the best of my knowledge and belief, and that I am authorised to make this application for Grant-aid.

Signed:

Date: 24 / 01 / 2023

Please return your completed application form to the address overleaf, for the attention of the TOWN CLERK

For office use only:			
Acknowledged		Previously Applied	
Grant Aid Awarded/Amount	Y / N	Chq No.	