



# WITNEY TOWN COUNCIL

## Grant-aid to Local Organisations APPLICATION FORM

(PLEASE COMPLETE THE FORM IN BLOCK CAPITALS)

### (1) Your Organisation

Name of Organisation	Mayor of Witney		
Registered Address*	Town Hall, Market Square, Witney		
Post Code	OX28 6AG	Tel No.	01993 226073 (PA)
Contact Name	Cllr Owen Collins		
Position in Organisation	Mayor of Witney <small>(i.e. Chairman, Treasurer, Secretary)</small>		
Registered Charity	YES/NO	Registration No.	n/a

*What are the activities and/or aims of the organisation:*

To raise money for local charities in the mayoral year. The Mayor will confirm whether he is supporting the same charities in 2024/25 as in 2023/24.

### (2) Membership

How many members do you have?	n/a
Approximately how many of your members live in Witney?	n/a
Is membership restricted in any way?	n/a
What is your annual subscription, if any?	n/a
Are you affiliated to a national organisation? If so, which one?	n/a

Local venue/meeting place	
<b>(3) Grants</b>	
Purpose for which the grant is required: 2 x subsidised hires (4-hour sessions) for either the Corn Exchange or Burwell Hall to raise funds for the Mayor's charities.	
Amount of grant applied for	£300 approx. (depends on day and venue).
Has your organisation previously applied to the Town Council for a grant?	YES/NO
If YES please give details	3 subsidised hires in 2023/24 – 1 carried over.
Have you applied for a grant to any other body or organisation?	YES/NO
If YES please give details	
<b>(4) Financial</b>	
<i>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.</i>	
<b>(5) Fundraising</b>	
What fundraising events or activities will your organisation be holding this year?  Quiz nights, gala event planned.	
<b>(6) General</b>	
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>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.</i>	
Signed: A Clapton (Deputy TC)	Date: 29.05.24

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