



# WITNEY TOWN COUNCIL

## Grant-aid to Local Organisations APPLICATION FORM

(PLEASE COMPLETE THE FORM IN BLOCK CAPITALS)

(1) Your Organisation			
Name of Organisation		WITNEY FOOD REVOLUTION	
Registered Address*		WESLEY CENTRE, METHODIST CHURCH, 40 HIGH STREET, WITNEY	
Post Code	0X28 6HG	Tel No.	07765 913294 (PERSONAL)
Contact Name		LINDA COX	
Position in Organisation		SECRETARY <small>(i.e. Chairman, Treasurer, Secretary)</small>	
Registered Charity	NO	Registration No.	
<p><i>What are the activities and/or aims of the organisation:</i></p> <ul style="list-style-type: none"> <li>- To reduce and promote the reduction of food waste</li> <li>- To help reduce food poverty, using surplus food</li> <li>- Provide access to good affordable food in the community</li> <li>- Work alongside others to provide support to the community</li> </ul>			
(2) Membership			
How many members do you have?		Approximately 3000	
Approximately how many of your members live in Witney?		Majority of our users live in Witney but we have users from across West Oxfordshire	
Is membership restricted in any way?		Anyone and everyone is welcome	
What is your annual subscription, if any?		N/A	
Are you affiliated to a national organisation? If so, which one?		Fairshare	
Local venue/meeting place		Wesley Centre, Witney	
(3) Grants			

Purpose for which the grant is required:  
To cover the cost of room hire and exclusive use of the bar to hold an annual fund raiser for the Witney Food Revolution

Amount of grant applied for	£274.00 (£228.33 + VAT £45.67)
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Has your organisation previously applied to the Town Council for a grant?	YES
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If YES please give details	In 2024 to support the first anniversary fundraiser held
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Have you applied for a grant to any other body or organisation?	NO
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If YES please give details	
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**(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?  
Nothing planned at this time

**(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: Linda Cox	Date:27/01/2026
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*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.	