WITNEY TOWN COUNCIL

Grant-aid to Local Organisations APPLICATION FORM

(PLEASE COMPLETE THE FORM IN BLOCK CAPITALS)

(1) Your	<u>Organisation</u>		! A	-1-41- :	
Name of Org	anisation	Witney Twinn	ing Asso	ciation	
Registered A	ddress*	Hexagon Hou	ıse, Ave l	Four, Statio	on Lane, Witney
Post Code	OX28 4BN			Tel No.	07970874418
Contact Nam	ie	John Thornto	n		
Position in Organisation		Chairman (i.e. Chairman, Treasurer, Secretary)			
Registered C	Charity	NO	Registrati	on No.	
					ur Twin Towns and encourages eracting with their counterparts.
(2) Memb	pership				
How many members do you have?		66			
Approximately how many of your members live in Witney?		55			
Is membership restricted in any way?		No			
What is your annual subscription, if any?		£0			
Are you affiliated to a national organisation? If		1			

Local venue/meeting place			
(3) Grants			
Purpose for which the grant is required: To generate awareness of our association, bring in more members and continue to interact with our Twin Towns.			
Amount of grant applied for		£2,498.00	
Has your organisation previously a	applied to the	Town Council for a grant?	YES/NO
If YES please give details			
Yes, for an annual contribution as well as for funds to he anniversary celebrations.			as for funds to hold
Have you applied for a grant to any other body or organisation?		or organisation?	NO
If YES please give details			

(4) Financial

	In	Out	Balance £
Opening Balance 18th Sept 2019			2675.69
AGM 2018			2675.69
Membership	24.00		2699.69
Remembrance Day	150.00	342.30	2507.39
Concert	1033.40	68.20	3472.59
Wreaths		34.00	3438.59
Petty Cash		100.00	3338.59
Unterhaching Phonebox Library		16.92	3321.67
Unterhaching Hotel Stay	68.64	70.00	3320.31
Admin		14.64	3305.67
Interest	1.58		3307.25
Witney Twon Council Funding	500.00		3807.25
Closing Balance			3807.25
Invoice to be Paid			
AGM 2019		62.92	3744.33

(5) Fundraising

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What fundraising events or activities will your organisation be holding this year? The main activities to raise fund will come from holding a couple of Dinners throughout the year as soon as it becomes safe where we will be holding a raffle that will generate funds.		
(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: <i>John Jhornton</i> Date: 16/09/20		

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.	

*Please note that if your address and telephone number are personal information and not that of the company or organisation, please complete the form below which will not be published on our website and will be held in accordance with GPDR regulations. By submitting this form, you are agreeing to the Town Council storing your personal information.

Address for correspondence:	
Telephone number:	07970874418
E mail address:	email@johnthornton.net