



WITNEY TOWN COUNCIL

Grant-aid to Local Organisations APPLICATION FORM

(PLEASE COMPLETE THE FORM IN BLOCK CAPITALS)

(1) Your Organisation			
Name of Organisation		OXFORDSHIRE ASSOCIATION FOR THE BLIND	
Registered Address*		BRADBURY LODGE GORDON WOODWARD WAY OXFORD	
Post Code		Tel No.	
OX1 4XL		(01865) 725595	
Contact Name		LAURA FINNIS	
Position in Organisation		TRUSTS FUNDRAISER (i.e. Chairman, Treasurer, Secretary)	
Registered Charity		Registration No.	
YES		1140556	
<p><i>What are the activities and/or aims of the organisation:</i></p> <p><i>OXFORDSHIRE ASSOCIATION FOR THE BLIND HAS THE PRIVILEGE OF SERVING AND SUPPORTING THE BLIND AND PARTIALLY SIGHTED WITHIN THE COUNTY. OUR AIM IS TO ENABLE THOSE SUFFERING FROM SIGHT LOSS TO LIVE AS FULL AND INDEPENDENT LIVES AS POSSIBLE. OUR SERVICES ARE ALL FREE AND APPLY TO PEOPLE OF ALL AGES.</i></p> <p><i>WE OFFER AN INFORMATION AND ADVICE HELPLINE AVAILABLE DAILY BETWEEN 10 AND 3. WE ALSO HAVE A WIDE RANGE OF USEFUL LEAFLETS ABOUT VARIOUS EYE ISSUES AND SERVICES FOR THE VISUALLY IMPAIRED. OUR SIGHT DESK AT THE HOSPITAL IS IN PRIME PLACE TO BE OF ASSISTANCE AND OUR QUARTERLY NEWSLETTER IS FULL OF HELPFUL LOCAL CONTACT DETAILS AND INTERESTING ARTICLES ABOUT EYE HEALTH DEVELOPMENTS AND LCOAL ACTIVITIES TO KEEP OUR CLIENTS INFORMED AND CONNECTED AS A COMMUNITY.</i></p> <p><i>OUR RESOURCE CENTRE IS FULL OF SPCIALIST EQUIPMENT SUCH AS LIGHTING, TALKING WATCHES/CLOCKS AND GADGETS TO MAKE COOKING AND OTHER ACTIVITIES SAFER AND EASIER. CLIENTS CAN SPEND TIME EXPLORING WHAT MIGHT BEST ENHANCE THEIR LIVES. SOME EQUIPMENT IS LOANED OUT LONG-TERM BUT WE GENERALLY ORDER IT FOR CLIENTS AND DELIVER IT TO THEM. WE ALSO OFFER TRAINING IN THE USE FO THE EQUIPMENT AND TECHNOLOGY TRAINING IN USE OF COMPUTERS, LAPTOPS, TABLETS AND MOBILE PHONES.</i></p> <p><i>OUR COUNSELLOR OFFERS ONE-TO-ONE EMOTIONAL SUPPORT AND OUR SOCIAL GROUPS PROVIDED MUCH NEEDED INTERACTION AND SOME PROVIDE PHYSICAL ACTIVITY SUCH AS CYCLING OR TENNIS. OUR CHIDLREN AND YOUNG PEOPLE'S SERVICE HAS ITS OWN PROGRAMME OF EVENTS TO SUPPORT FAMILIES.</i></p>			

THIS HAS ALL MOVED TO ONLINE OR THE TELEPHONE OVER THE PAST YEAR.

(2) Membership

How many members do you have?	3,883 CLIENTS
Approximately how many of your members live in Witney?	200
Is membership restricted in any way?	ALL CLIENTS CAN ACCESS OUR SERVICES BUT WE HAVE A £10 A YEAR MEMBERSHIP TO SUPPORT US.
What is your annual subscription, if any?	N/A
Are you affiliated to a national organisation? If so, which one?	NO
Local venue/meeting place	OUR OFFICES AT BRADBURY LODGE

(3) Grants

Purpose for which the grant is required: INFORMATION, ADVICE AND EQUIPMENT PROJECT WHICH INCLUDES OUR HELPLINE, LEAFLETS, WEBSITE, SOCIAL MEDIA AND OUR RESOURCE CENTRE WHICH IS THE ONLY ONE IN THE COUNTY DEDICATED TO VISUALLY IMPAIRED PEOPLE.

Amount of grant applied for

£500

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

YES

If YES please give details

IN 2019, WE APPLIED FOR £1000 TO OUR INFO AND ADVICE PROJECT BUT RECEIVED NOTHING. IN 2018 WE RECEIVED £300.

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

YES

If YES please give details

WE APPLY TO MANY PARISH AND TOWN COUNCILS IN OXFORDSHIRE AND OTHER TRUSTS AND FOUNDATIONS TO FUND OUR WORK.

(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? DEPENDING ON THE PANDEMIC, WE AIM TO HAVE A TANDEM CYCLING EVENT IN THE SPRING AND A SKY-DIVE IN THE AUTUMN.

(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: Laura Finnis

Date: 5th March 2021

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.	