

WITNEY TOWN COUNCIL

Grant-aid to Local Organisations APPLICATION FORM (PLEASE COMPLETE THE FORM IN BLOCK CAPITALS)

(1) Your Organisation							
Name of Organisation	Forganisation Witney Branch, Royal British Legion						
Registered Address*					_		
Post Code			Tel No.				
Contact Name	John	John Cotton					
Position in Organisation	Branch Secretary (i.e. Chairman, Treasurer, Secretary)						
Registered Charity	YES/MÓ	Reg	gistration No.	2191279	l		
What are the activities and/or aims of the organisation: To safeguord the welfare, interests and memory of Serving and Ex-Service personnel, and their dependants.							
(2) Membership							
How many members do you have?			58				
Approximately how many of your members live in Witney?			47				
Is membership restricted in any way?			No				
What is your annual subscription, if any? Are you affiliated to a national organisation? If so, which one?		n?	£17.00 THE ROYAL	BRITISH	LEGION		
Local venue/meeting place			FLEECE HOTEL				

(3) Grants						
Purpose for which the grant is required: To cover the cost of hire of the Corn Exchange						
Amount of grant applied for £ 165						
Has your organisation previously applied to the Town Council for a grant?	YE/\$/NO					
If YES please give details						
Have you applied for a grant to any other body or organisation?	YE/S/NO					
If YES please give details						
(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? Annual Table Top Sale						
(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: 31.5.2	021					
Please return your completed application form to the address overleaf, for the attention of the TOWN CLERK						

app

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