

Part 1: About You / Your Organisation

Name of Organisation: _____

Name of Applicant _____ Position in Organisation _____

Address for Correspondence _____

Phone Number: _____ Email Address: _____

Number of active members in your group: _____ Average number of regular users: _____

Do your members pay a membership fee? £ _____ Please state amount

Do your members pay an attendance fee? £ _____ Please state amount

Does your group have a Constitution? Yes/No delete as appropriate	Office Use Only Dissolution Clause? Yes/No
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Where do **most** of your members come from (please give approximate distance from Hebden Royd)

0 – 1 miles <input type="checkbox"/>	1 – 5 miles <input type="checkbox"/>	Over 5 miles <input type="checkbox"/>
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Please give details of previous funding received from **Hebden Royd Town Council**:

Year	Amount	Project	Office Use Only Satisfactory End of Grant Report?

Part 2: About Your Project

Please give a full description of the project for which funding is requested (continue overleaf if necessary):

Start Date: _____ Finish Date: _____

Project Description _____

Project Description Continued _____

(please use continuation sheet if necessary)

If the project involves young people and/or vulnerable adults do you have policies and procedures in place to protect them? _____

Who will benefit from your project?

Projected number of users: _____ Will you be making any charge to users? _____

Age Ranges:

0-5 <input type="checkbox"/>	5-11 <input type="checkbox"/>	11-19 <input type="checkbox"/>	19-25 <input type="checkbox"/>	25-40 <input type="checkbox"/>	40-60 <input type="checkbox"/>	60+ <input type="checkbox"/>
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Where will your users come from? (please give approximate distance from Hebden Royd)

0 – 1 miles <input type="checkbox"/>	1 – 5 miles <input type="checkbox"/>	Over 5 miles <input type="checkbox"/>
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Number of volunteers who will deliver your project _____

Cost breakdown please give as much detail as possible about the cost of your proposed project

Amount	What for

Total cost of project: £ _____

Amount requested from Hebden Royd: £ _____

Amount requested from other sources

Amount	Source

Signature of person completing this form:

Date:.....Position in your group:.....