

WITNEY TOWN COUNCIL

Youth Services Grant APPLICATION FORM

(PLEASE COMPLETE ELECTRONICALLY)

Organisation			
Name of Organisation			
Registered Address (including Post Code)			
Website		Telephone	
Facebook/Twitter		Email	
Contact Name			
Position in Organisation	(i.e. Ch	airman, Treasurer, S	Secretary)
Registered Charity	YES/NO	Registration Number	
What are the activities and/o	r aims of the organisation?		

Membership		
How many members do you have?		
Approximately how many of your members live in Witney?		
Is membership restricted in any way?		
What is your annual subscription, if any?		
Are you affiliated to Oxfordshire Youth or other similar umbrella organisation? If so, which one?		
Local venue/meeting place (if applicable)		
Grant-Funding		
Purpose for which the grant is required:		

Amount of grant applied for	£			
Has your organisation previously applied to the Town Council for a grant? YES/NO				
If YES, please give details				
Have you applied for a grant to any other body or organ	YES/NO			
If YES, please give details				
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.				
Fundraising				
What fundraising events or activities will your organisation be holding this year?				

General				
Please provide or attach any additional information.	ation which may assist the Council in reaching its			
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:			
If posting, 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.