

Hall Hire Grant Application Form 2024 -25

Please complete the form clearly in black ink and BLOCK CAPITALS. Continue on another sheet of paper if necessary.

Q1. You or Your Organisation	
Name of You/Organisation and location	
Summary of aims and objectives	
Age groups specifically catered for, if any	
Are you or the organisation a non- profit making body?	
Are you or the organisation a Registered Charity? If so please give registration number	
Are you registered for VAT?	
Number of members	
Number of members resident in South Woodham Ferrers	
Is membership restricted in any way? If so please specify	
Do you charge a membership fee or charge for access to your activities? Please give details	



Q2. Details of Grant Applied For	
Purpose for which the grant is required:	
Please give full details, including how the project meets a loc	cal need and there is
community support for the project, evidence must be provide	
The project should improve and/or protect the social, environment of the locality where the funding is being spent. How will referrers benefit?	
	_
Total cost of project	£
Fund request from the Town Council	£
Funds available from your/organisation's own resources	£



Do you receive any other financial contribution from the Town Council? If so, please provide the details	
Please give details of any fund raising event that you are undertaking for this project:	
Please state if the grant is awarded how publication of the grant will be made: ie logo on uniform / equipment / press release etc	

Q3. Financial Information Required	
Details of all costs. Please provide copies of appropriate estimates or price lists	Attached Yes/No
A copy of your year-end audited accounts Please give reasons if not available	Attached Yes/No/Not applicable

Name of person making application	
Address for correspondence	
Post code	
Daytime Telephone Number	
Email address	



Q4. Declaration		
your Chairperson, Treasur	enior member of your organisation. For example, this may be er or Secretary. They must read the application and sign below. nain contact name in Q3.)	
I confirm, on behalf of	(insert name of organisation).	
That I am authorised to sign this declaration on its behalf and that, to the best of knowledge and belief, all replies are true and accurate.		
	he Town Council's Grants Policy which accompanied this application	
	application is made on the basis that if successful, the organisation at for the purpose specified in this application and will have to comply	
Post held in organisation		
Title First N	lame:Surname:	
Organisation address:		
	Post Code:	
Telephone:		
Signed:	Date:	
Q5. Signature of Pers	on Completing the Application	
This must be the signature of the person named in Q3 as the main contact and not be the same person who has signed in Q4.		
I confirm that, to the best of	my knowledge and belief, all the information in this application form	
is true and correct. I understand that you may ask for additional information at any stage of the		
application process.		
Signed		
Date		



Please return your completed form to:

Town Clerk South Woodham Ferrers Town Council, Champions Manor Hall Community Centre, Hullbridge Road, South Woodham Ferrers, Essex CM3 5LJ

Email:

katkins@southwoodhamferrerstc.gov.uk

We will acknowledge receipt of your application and let you know the date of the Committee meeting when your application will be discussed.