FUNDING APPLICATION FORM

Please complete this form in full and return it to Broughton Alive, c/o 12 Merton Close, Broughton Astley, Leicester, LE9 6QP. Alternatively – email completed form to paul@broughtonalive.com



Applicant Details				
Name of organisation:				
Address:				
Telephone No.				
Contact Name:				
E-Mail Address:				
Organisations' Financ	ial Position			
Bank/Building Society Name:				
Current Balance:				
Does your organisation	have audited accounts	available? Y / N		
Funding Details				
Amount requested:	£	Total Estimated cost of project	£	
Please explain in the box below what the funding will be used for. It would help your application if you give specific details of what is planned and the total estimated costs involved / any match funding etc				

PTO

Have you or your organisation requested any funding from this group before? $\;\;$ Y $\;/\;$ N If so, please give details below :

Date	Amount requested £	What the funding was used for:		
Please provide details in the box below of any other fund-raising efforts your organisation is making currently, and any other information you feel will help your application.				
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Declaration				
I certify that the info	ormation given on this	form is accurate and that [insert the name of your		
organisation] is a				
bona fide organisation based in (Broughton Astley / other(name)				
I also certify that the funding sum requested above will be used solely for the purpose specified in this application, and will directly benefit residents and visitors of Broughton Astley.				
Signed for and				
on behalf of the organisation				
making this funding request:				
Full name:				
Position in organisa	ation:			
Date:				