



**MALMESBURY TOWN COUNCIL**

**GRANT APPLICATION FORM FOR VOLUNTARY ORGANISATIONS  
(S137 Local Government Act 1972)**

Please complete in dark ink and **BLOCK CAPITAL LETTERS** or type

<b>CONTACT DETAILS</b>	
Name of Organisation:	
Charity No: (if applicable)	
Name of contact:	
Contact address: (please include postcode)	
Contact telephone no:	
Contact email address:	
Position in organisation:	
<b>YOUR GROUP</b>	
Organisation's principal aims and objectives:  What services, facilities and/or activities does your organisation provide?	

<p>Approximately, how many Malmesbury residents benefit from the above service, facility and/or activity?</p>	
<b>YOUR EVENT, ACTIVITY OR PROJECT</b>	
<p>Purpose for which grant aid is sought:</p>	
<p>Please state briefly how a grant would benefit the community and/or residents of Malmesbury:</p>	
<p>When are you planning for your project or activity to place?</p>	<p>Start Date:</p> <p>End Date:</p>
<p>What, if any safety issues are related to your event/ project/ activity? Safety issues could be related to participants, organisers, general public and /or the environment. Please tell us if your project/ activity has any such issues and what actions, policies or insurance you have to minimise risk.</p>	
<b>FUNDS</b>	
<p>Amount of grant aid sought:</p>	<p>£</p>



## MORE INFORMATION

<p>Please provide details from your most recent annual accounts:</p>	<p>Account year ending: 20</p> <p>Total (gross income) ..... £</p> <p>Minus total expenditure ..... £</p> <p style="text-align: right; margin-right: 20px;">_____</p> <p>Equals loss/ profit for the year ..... £</p> <p>Savings (reserves, cash, investments) ..... £</p>	
<p><b>Senior Contact: Please read and sign the declaration on this form:</b> (This could be your Chairperson, Treasurer or Secretary, for example. They must read the application and also sign below. They must be different to the person applying for this grant as on Page 1 of this form).</p>	<p>I confirm, on behalf of (insert name of group):</p> <p>that I am authorised to sign this declaration on its behalf, and that to the best of my knowledge and belief, all replies are true and accurate.</p> <p>I further confirm that this application is made on the basis that if successful, the group will be bound to use the grant only for the purpose specific in this application, and will have to comply with any terms and conditions attached to the grant.</p> <p>Position held in Group:</p> <p>Name:</p> <p>Address:</p> <p>Phone No:                                      Email:</p> <p>Signed: _____ Date: _____</p>	
<p><b>Confirmation and Signature of Main Contact as on Page 1.</b></p>	<p>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 any additional information at any stage of the application process.</p> <p>Signed: _____ Date: _____</p>	

**Completed forms should be returned to:**  
Town Clerk, Malmesbury Town Council, Town Hall, Cross Hayes, Malmesbury Wilts SN16 9BZ