

AWBRIDGE PARISH COUNCIL

**Grant Application Form**

**Please complete in Block capitals**

Name of Organisation			
Registered Charity No. (If applicable)			
Aims of Organisation			
Contact name			
Contact Address			Postcode
Telephone Number		Email address	

Amount of Grant applied for			
Purpose of Grant			
How will this benefit the people of Awbridge?			
Details of other bodies approached for funding.	None		

**Please return completed application form, together with a copy of your group's accounts, to the Parish Clerk, details below. If you cannot supply accounts, please contact the clerk for advice.**

<b>This Section for Parish Council use:</b>			
Application Reference Number:	Date Received		
Decision of Parish Council Meeting Approved: Yes/No	Amount of Grant £		
Date Sent	Cheque No.		