

KINGSKERSWELL SUMMER MOON TRUST

(Registered Charity No: 1141844)

Example Grant Application Form

Name and Address of Applicant:

Kevin Blunt

Contact details:

070000 1234567

Organisation/Beneficiary (if different):

Newton Footability

Registered Charity: Yes/No No. If Yes, registration number:

If you are not a registered charity, please detail specific hardship or need (charitable cause):

We are a small disability football club entirely dependent upon donations and fund-raising to operate.

Amount requested (if known): £500

Application, please specify details, particularly how funds will be spent or distributed (use separate sheet if necessary):

Our operating costs annually far exceed our income from all sources and we will use the money to fund the hire of the venue and to acquire new and replacement kit and equipment.

I confirm that I am the beneficiary or I am authorised to make this application on behalf of the beneficiary and, if granted any funds, monies will be spent or distributed as outlined above:

Signed: K Blunt

Date: 14/08/2014

For Kingskerswell Summer Moon Trust Only

Grant Approved/Not Approved Amount: £

Conditions:

Signed: (Trustee) Date:

All information recorded is subject to the General Data Protection Regulations 2018 (please see separate Privacy Notice and Consent Form). The Kingskerswell Summer Moon Trust will retain a copy of this form permanently. Details may be disclosed to the Charities Commission and/or Her Majesty's Revenue and Customs.