

ILSINGTON PARISH COUNCIL

APPLICATION FOR GRANT

Name of Organisation	
Name of Contact	
Address of Contact including post code.	
Phone Number.	
Email Address.	
Project Name.	
Project Description.	
Amount of Grant requested	
Describe what the money will be spent on.	
How will the project benefit the parish of Ilsington?	
Please state how you consider you meet the conditions of the Council's grant aid policy.	
Where else have you applied for funding?	
Element of self- help provided by members of the organisation	

❖ Copy of last prepared set of accounts are required and must be attached.

Signed.....Print Name.....

Date.....Office held in Organisation.....

If successful, cheque payable to.....

Office Use: Date Recd..... Approved: Yes/No Date Approved.....

Minute No:.....Cheque No:.....Signed.....