**ROMSEY TOWN COUNCIL -APPLICATION FORM FOR GRANT**

|  |  |
| --- | --- |
| NAME OF ORGANISATION: |  |
| ADDRESS OR MEETING PLACE OF ORGANISATION: |  |
|  |  |
|  |  |
|  |  |
|  |  |
| NAME OF CONTACT: |  |
| PHONE NUMBER: |  |
| EMAIL ADDRESS: |  |
| AMOUNT REQUESTED: |  |
| WHAT IS THE GRANT FOR? |  |
|  |  |
| *If there is insufficient space here please* |  |
| *attach a separate sheet* |  |
|  |  |
|  |  |
|  |  |
| WHY IS THE GRANT NEEDED? |  |
|  |  |
| *If there is insufficient space here please* |  |
| *attach a separate sheet* |  |
|  |  |
|  |  |
| HOW WILL ROMSEY OR ITS  |  |
| RESIDENTS BENEFIT? |  |
|  |  |
| *If there is insufficient space here please* |  |
| *attach a separate sheet* |  |
|  |  |
|  |  |
| HAVE YOU APPROACHED ANY OTHER BODIES FOR A GRANT? | YES/NO |
| IF YES PLEASE GIVE DETAILS |  |
|  |  |
| *If there is insufficient space here please* |  |
| *attach a separate sheet* |  |
|  |  |
|  |  |
| HAVE YOU HAD A PREVIOUS GRANT FROM ROMSEY TOWN COUNCIL? | YES/NO |
| IF YES WAS THE INTENDED BENEFIT  |  |
| ACHIEVED? |  |
|  |  |
| *If there is insufficient space here please* |  |
| *attach a separate sheet* |  |
|  |  |
| ADDITIONAL INFORMATION REQUIRED | Latest Financial Accounts Enclosed | Please tick box |  |

Date…………………………………….. Signature …………………………………………………………

Please return form to: Romsey Town Council, 1 Market Place, Romsey, Hants, SO51 8YZ