



BIDEFORD BRIDGE TRUST

REGISTERED CHARITY NO.204536

**First Floor Offices
4 Bridgeland Street
Bideford
Devon
EX39 2PS
01237 871888**

APPLICATION BY ORGANISATION **FOR AN URGENT GRANT**

1. What is the name and address of your club/organisation?
2. Please give name and address for correspondence.

Email:
Telephone:
3. Are you a registered Charity? **Yes/No**. If yes, please state registration number.
4. When was the club/organisation founded?
5. Please state **briefly** the main purposes, aims and activities of your club/organisation
6. What facilities, both sporting and otherwise, does your club/organisation provide and where are those facilities based?
- 7.a Which persons and of what ages use and are entitled to use the facilities of your club/organisation?
- 7.b Is membership restricted in any way and if so, in what way?
- 7.c Is the club/organisation open to both sexes?
- 7.d Is there a membership charge and if so, how much?
- 7.e How many members do you have?

8. What is the size of the Grant for which your club/organisation is applying?
9. For what purpose will the Grant be used if it is made?
10. Please explain why it is appropriate to apply for the Grant now, rather than when the Trust considers Annual Grant Applications in July?
11. Have you applied for any other Grants from any other Trusts or organisations or do you intend to make any such other applications? If so, please would you give brief details of those applications

12. Please state below the cash balance available to your club/organisation as shown at the close of the accompanying accounts. ("Cash Balance")

Cash balance: £

PLEASE NOTE THAT FAILURE TO SUPPLY THE REQUESTED "ACCOMPANYING ACCOUNTS" WILL MAKE THE APPLICATION LIABLE TO BE REJECTED

13. Is there any other information which your club/organisation would like the Trust to have in considering whether to make a Grant?

14. Subject to your application being successful payment will be made either by cheque or BACS. Please provide your bank details in case of BACS payment.

ACCOUNT NAME

SORT CODE

ACCOUNT NUMBER

SIGNED: **DATED**

(Secretary/Officer of the above named Club/Organisation)

GENERAL DATA PROTECTION REGULATION

I understand that the Trust needs to retain the information that I have supplied in order to be able to demonstrate compliance with the Trust's Scheme to the Charity Commission and to satisfy the Trust's auditors that the monies entrusted to the Trustees have been properly spent. Both these requirements are legal obligations.

Subject to these obligations, the Trust does not disclose any information supplied by you to any other third party.

I understand and accept the basis upon which my information is supplied to the Trust.

Signed.....

Dated.....