APPLICATION FOR A GRANT FROM THE GREAT STONE BRIDGE TRUST

| Name of your organisation |
|---|
| |
| (Your) Main Contact Name |
| (1002) 1.10111 0 0111001 1 101110 |
| Contrat Addition on the stands |
| Contact Address and Postcode |
| |
| E-mail Address |
| |
| Telephone Number(s) |
| |
| Brief Description of your group's activities and please explain what the grant is needed for. Also include what amount your organisation needs to keep in reserves as per your 'reserves policy'? |
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| |
| Are you a branch of a larger organisation? If yes – give brief details please (or on separate sheet) |
| |
| |

| How many members/participants does your organisation have at any one time? | | | |
|--|--|--------------------------|--|
| | | | |
| | | | |
| How many | of the above are Edenbridge residents? | | |
| J | | | |
| | | | |
| List vour re | gular sources of funding, e.g. grants, annual subscriptions, | fund raising events? | |
| Source: | guiar sources of funding, e.g. grants, aimaar subscriptions, | Amount p.a. | |
| | | • | |
| 1) | | | |
| 2) | | | |
| 2) | | | |
| 3) | | | |
| 4) | | | |
| ") | | | |
| 5) | | | |
| 10 | | | |
| If necessar | y, please continue overleaf | | |
| | | | |
| If you have <u>not</u> for any reason attached accounts which provide these answers: | | | |
| Total resour | rces e.g. savings, cash reserves, investments | | |
| | | | |
| | | | |
| | | | |
| Total annual expenditure | | | |
| | | | |
| | | | |
| Grant amount for which you would like to apply for this coming year | | | |
| | | | |
| | | | |
| I have attack | hed our latest set of accounts Yes/No | | |
| I confirm th | at this organisation is compliant with the law in respect of | its activities including | |
| | ry insurance, Health & Safety and Safeguarding/DBS requ | _ | |
| a. 1 | | | |
| Signed | Date | ••••• | |
| Return to: | | | |
| | The Great Stone Bridge Trust, c/o Southworth and Co Ltd, Treasures, Four | | |
| Elms, Edenbridge Kent, TN8 6NE or via email on clerk@gsbtrust.org | | | |