



Saltash Town Council



Grant Application Form

APPLYING FOR:
(Tick one box)

Community Chest Grant

Festival Fund Grant

DATE APPLICATION SUBMITTED:

12 July 2019

Contact Name:	COLIN BART
Position:	MEN'S PRESIDENT
Organisation:	SALTASH BOWLING CLUB
Contact Address:	
Telephone Number:	
E-mail:	
Status of Organization:	
Charity/Company number (if applicable)	Charity No: Company No:
What geographical area does your organization cover?	SALTASH + DISTRICT

<p>How long has your organization been in existence?</p>	<p>96 YEARS</p>
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Please note that it may be asked to attend a meeting of the Policy and Resources Committee to answer questions on your application.

1. Organisation Background

	Date Applied	Project	Amount Applied for	Successful Y/N
<p>Have you applied for a grant from Saltash Town Council within the last 5 Years?</p> <p>(Please list – continue on a separate sheet if necessary)</p>				
<p>Please list the aims and objectives of your organization</p>	<p>TO PROVIDE A SAFE AND FRIENDLY ENVIRONMENT FOR THE PLAYING AND COACHING OF LAWN BOWLS.</p>			

<p>What are the main activities of your organization?</p>	<p>LAWN BOWLS</p>
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	<p>Yes / No or N/A</p>
<p>Are you part of a religious group?</p>	<p>No</p>
<p>If application is for a Church – is it for anything other than a parish clock, Community Hall (used by all within the community) or environmental purposes?</p>	<p>N/A</p>
<p>If application is for a School – Is, it for anything other than environmental purposes or a project that does not benefit the wider community and is not in addition to statutory services?</p>	<p>N/A</p>
<p>If application is from an education, health or social service establishment – do you work in partnership with other groups?</p>	<p>N/A</p>
<p>If application is from an education, health or social service establishment – is project in addition to statutory services?</p>	<p>N/A</p>

2. Your project

<p>Project</p>	<p>Start Date</p>	<p>01 / 08 / 2019</p>
	<p>Finish Date</p>	<p>on going</p>
	<p>Total Cost</p>	<p>£ 500</p>
	<p>Grant Applied For</p>	<p>£ 250</p>

<p>Project title:</p>	<p>JUNIOR BOWLING WOODS</p>
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<p>Description of project (please continue on a separate sheet if necessary):</p>	<p>ONE OF OUR CLUB AIMS/OBJECTIVES IS TO PROVIDE BOWLING ACTIVITIES FOR ALL AGES. WE HAVE STARTED JUNIOR COACHING WITH LOCAL PRIMARY SCHOOLS BUT THE CHILDREN NEED MUCH SMALLER BOWLING WOODS TO FIT IN THEIR HANDS. WE NEED THESE TO IMPROVE OUR COACHING TO THE CHILDREN</p>
<p>Where will the project/activity take place?</p>	<p>SALTASH BOWLING CLUB AND AT REGIONAL SCHOOL COMPETITIONS</p>

<p>Who will benefit from the project? (What groups will benefit and approximately how many people will benefit in total)</p>	<p>PRIMARY SCHOOL CHILDREN WILL BENEFIT. LAST YEAR WE WORKED WITH 20 CHILDREN AND HOPE TO INCREASE TO 30</p>
<p>What evidence do you have that this project is required? (This might be survey work or statistical evidence)</p>	<p>IN LAST YEARS PRIMARY SCHOOL COMPETITION OUR TEAM WERE THE ONLY GROUP WITHOUT JUNIOR WOODS. THE CHILDREN DID VERY WELL BUT STRUGGLED AS THEIR WOODS WERE TOO SMALL</p>
<p>What support have you received for this project? (Please tell us about any expressions of support you have received from outside your organization Consultation with Community)</p>	<p>WE HAVE WRITTEN TO LOCAL BUSINESSES ASKING FOR SPONSORSHIP BUT HAVE ONLY HAD A NEGATIVE RESPONSE TO DATE</p>

<p>How will the project be managed and how will you measure its success?</p>	<p>WE HAVE A GROUP OF QUALIFIED COACHES AND MEMBER VOLUNTEERS. THE COACHES WILL MANAGE THE TEACHING AND I WILL BE PROJECT MANAGER</p>
<p>Please give the timescale and key milestones for your project, including a start date and finish date.</p>	<p>WE WOULD LIKE TO GIVE SOME COACHING TO JUNIORS ASAP BUT THE PROJECT WILL BE ON GOING YEAR AFTER YEAR</p>
<p>What arrangements do you have in place to ensure safeguarding of children and/or young people and/or vulnerable people (applicable only if your project involves working with this client group)</p>	<p>WE HAVE A DEDICATED WELFARE OFFICER AND ALL OF OUR COACHES ARE POLICE CHECKED</p>

3. How you will pay for your project.

<p>What will the money be spent on? (Provide a full breakdown of project cost(s) identifying what cost(s) this grant would be spent on)</p>	<p>EACH SET OF WOODS COST £125. WE NEED 4 SETS AND ARE APPLYING FOR THE COST OF TWO SETS</p>
<p>How will you promote STC once application and project are complete?</p>	<p>WORD OF MOUTH TO PRIMARY SCHOOL SPORT ADMINISTRATORS AND TO OTHER COMPETITIVE CLUBS AT PRIMARY SCHOOL COMPETITIONS</p>

Saltash Town Council considers Match Funding is extremely important. Please list any applications you have made for funding from other organisations in the table below:

Organization	Contribution Sought (£)	Applied (please tick as appropriate)	Granted (please tick as appropriate)
ROGER YOUNG	£250	✓ NO REPLY	
WAITROSE GRIFFIN SCHEME		✓	
SALTASH LODGE	£125	✓	

Please confirm the bank account your project is using is in the project's name/organization name

✓

4. Further information enclosed Checklist.

	Enclosed (please tick)
A copy of your organization's most recent bank statements (mandatory)	✓
Copies of all relevant Employer's, Building & Public Liability Insurance Certificates & Title Deeds if appropriate (mandatory)	✓

A letter head showing the organization's address and contact details	✓
A copy of your constitution and articles of association (or similar documents if the above do not exist, showing the organization's status)	✓
A copy of your organization's latest set of accounting statements (if any exist)	
Copies of any letters of support for your project	
If your organization has previously received a grant from STC please include a brief report and evidence of how you promoted the contribution from the Council	
Other (please list)	

If any of the above documents have not been enclosed, please give reasons why in the box below:

5. Declaration by the applicant

I/we declare that, to the best of my/our belief, the information given on this application form and in any enclosed supporting document is correct.

I/we declare that, I/we have read the Town Council's Grant Policy and believe to the best of our knowledge, that we meet the criteria set out by the Policy.

I/we confirm that a risk assessment will be completed prior to an event granted funding by the Town Council.

I/we accept the following:

- (i) that any false information we provide, even if provided in good faith, may lead to the withdrawal of the grant offered;
- (ii) that any grant offered will be used only for the purposes set out in this application;
- (iii) that we will provide reports on progress at the request of the Town Council;
- (iv) the support of the Town Council will be publicised;
- (v) that should any grant offered, not be used in accordance with the terms and conditions set by the Town Council, we undertake on behalf of the organisation to repay the outstanding amount to the Town Council on demand.

Please be aware that the decision as to whether you have been successful in your application will be communicated to you shortly after the relevant Council meeting.

Signed:			
Print Name(s):	COUN BURT		
Position(s):	MEN'S PRESIDENT SARTASH BOWLING CLUB		
Date:	12 July 2019		

Applicants should refer to the Privacy Notice on the Town Council Website www.saltash.gov.uk for details on how we use your data.

COMPLETED FORMS SHOULD BE RETURNED TO:
The Town Clerk, Saltash Town Council, The Guildhall, 12 Lower Fore Street,
Saltash PL12 6JX Email: enquiries@saltash.gov.uk

OFFICE USE ONLY:	
Date received	
Received by:	
Application Reference:	
Date to P&R Chairman/Vice Chairman	
Approved to go to Committee	
Committee Date	
Decision/Minute number	
Amount awarded	
Application refused by P&R Chairman or refused by Committee	
Appeal notice issued	
Appeal received	
Approved for Committee	
Decision/Minute number	