

APPLICATION FORM FOR GRANT AID

This form should be completed and sent with a copy of your last audited accounts or financial statement to the Clerk, Lancing Parish Council, Parish Hall, South Street, Lancing, BN15 8AJ before 30th September.

Name of Applicant Organisation

- a) Year of formation
- b) Objectives *
- c) Current Membership

Person Responsible

Address

Contact Tel. No

Describe the purpose for which Grant Aid is being sought and how it will benefit Lancing*

Total anticipated cost of project and how this will be achieved *

Amount of Grant requested and when will this be required

If you have applied to any other source for financial help please give details *

I hereby certify that to the best of my knowledge and belief that the above information is correct.

Date

Signed.....

**Use separate sheets if necessary*