

**West Dereham Parish Council**  
**Grants for the benefit of the people of West Dereham Parish**

(Please read the Grant Awards Policy prior to completing this form)

Please send completed application forms to:  
Kingscroft, Basil Road, West Dereham, King's Lynn, Norfolk, PE33 9RP  
For further information please call the Parish Clerk on 01366 502110

**Section 1: Organisation**

Organisation:	
Primary contact name:	
Position (within applicant organisation):	
Contact address:	
	Postcode:
Telephone Number (Day):	(Night):
Email address:	
Date of submission:	

**Section 2: Details of Organisation**

Brief description of your organisation's aims:	
How long has it been in existence?	Is it run by a committee?
If yes, how many committee members?	Can anyone join?
If not, what are the restrictions?	
How often do you meet?	Where are meetings held?
How many members do you have?	
What percentage of members live in West Dereham Parish?	

**Section 3: Organisation's Purpose**

<p>Please give us a summary of the activities your organisation has achieved during the last year. If you are a new organisation please give us an idea of the activities you wish to undertake:</p> <p>Describe how the local community benefits from your organisation:</p>
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## Section 4: Grant Request

Amount requested from the Parish Council:

Please give details of what you wish to use the proposed grant award for:

Have you received or applied for funding from any other source for this project/purpose? Please give details:

## Section 5: Financial Details

Do you receive funding from any other sources and if so from where?

If you have previously received a grant from West Dereham Parish Council in the past 3 years please give details:

## Section 6: Supporting Information

Please tick the following:

I have read and agreed to your terms and policies

I have enclosed the following supporting material:

A constitution or set of rules by which my organisation runs

The latest set of current annual accounts\*

Any other supporting information

\* If you are a new organisation please include evidence of a planned budget.

## Section 7: Policy and Declaration

*I declare that, to the best of my knowledge and belief, the information given on this application form and in any supporting material is correct. I understand that you may ask for additional information at any stage of the application process.*

Signature:

Name of signatory:

Position in organisation:

Date:

**Whoever signs this declaration and takes overall responsibility for this funding on behalf of the group must be 18 years of age or over. Please note that completion of this form does not necessarily mean that a grant application will be successful in part or whole.**