

Please complete all the questions.

Grant Form Number: **D6-**

Details of Applicants	Answers
<b>Individual Applicant Details:</b>  <div style="text-align: right;">Name</div> <div style="text-align: right;">Address</div>  <div style="text-align: right;">Daytime Tel No</div> <div style="text-align: right;">Evening Tel No</div> <div style="text-align: right;">email</div>	
	Post Code

<b>Application on behalf of Club:</b>  <div style="text-align: right;">Name of Club</div> <div style="text-align: right;">Club Venue</div>  <div style="text-align: right;">Daytime Tel No</div> <div style="text-align: right;">Evening Tel No</div> <div style="text-align: right;">email</div> <div style="text-align: right;">Name and address of Secretary / Treasurer</div>  <div style="text-align: right;">Purpose of Club</div> <div style="text-align: right;">Year established</div> <div style="text-align: right;">Membership details</div>  <div style="text-align: right;">Are your members mostly from West Lothian?</div> <div style="text-align: right;">Is your club a member of the West Lothian Sports Council</div>	
	Post Code
	Post Code
	<div style="text-align: right;">Senior:      male <input type="checkbox"/>      female <input type="checkbox"/></div> <div style="text-align: right;">Juniors:     male <input type="checkbox"/>      female <input type="checkbox"/></div> <div style="text-align: right;">Total Nos    <input type="text"/></div> <div style="text-align: right;">Fees            £ <input type="text"/></div>
	<div style="text-align: right;">Yes <input type="checkbox"/>      No <input type="checkbox"/></div> <div style="text-align: right;">Yes <input type="checkbox"/>      No <input type="checkbox"/></div>

<b>For All Applicants:</b>  <div style="text-align: right;">State amount of grant received in last 2 months</div>  <div style="text-align: right;">To whom should cheque be paid if successful</div>	<div style="text-align: right;">a) West Lothian Council      £ <input type="text"/></div> <div style="text-align: right;">b) Any other source          £ <input type="text"/></div>
	<div style="text-align: right;">Name <input type="text"/></div>

<b>Please describe what you or your group/club hope to achieve</b>	<b>Answers</b>
<b>Your aims:</b> Describe what your grant hopes to achieve.	
<b>Club Applications:</b> How many people will benefit from the grant?	
<b>Please give an outline of the activities to be undertaken or the type of equipment you wish to purchase</b>	

**Remember, your application can only be processed if all the questions in this form are answered**

Purpose for which grant is requested	Please provide the following (tick relevant boxes)
<b>Sport and Recreation</b>	<input type="checkbox"/> Details of project, event, competition, or travel outwith West Lothian <input type="checkbox"/> Detailed breakdown of projected expenditure <input type="checkbox"/> Reference for <b>individual</b> applicants <input type="checkbox"/> <b>Clubs</b> – copy of constitution and latest bank statement
<b>Purchasing equipment</b>	<input type="checkbox"/> Itemised list of equipment with breakdown of costs <input type="checkbox"/> Two quotes for all items <input type="checkbox"/> <b>Clubs</b> – copy of constitution and latest bank statement <input type="checkbox"/> Reference for <b>Individual</b> applicants
<b>Cultural and Social</b>	<input type="checkbox"/> Details of project, visit, activity <input type="checkbox"/> Detailed breakdown of projected expenditure <input type="checkbox"/> <b>Clubs</b> – copy of constitution and latest bank statement <input type="checkbox"/> Reference for <b>individual</b> applicants
<b>Amount of Grant Requested</b>	<b>£</b>

**MAKE SURE YOU HAVE ATTACHED  
ALL THE DOCUMENTATION REQUESTED!**

**YOUR GRANT APPLICATION CANNOT BE  
PROCESSED WITHOUT THEM!**

<b>Confirmation</b>	
<b>For Club applications:</b>  Please give details of a committee member who can confirm the purpose of your grant application	<b>Name</b>
	<b>Address</b>
	Post Code
<b>Daytime Tel No</b>	

<b>For Individual applicants:</b>  Please give details of a referee who may be contacted in support of your application	<b>Name</b>
	<b>Address</b>
	Post Code
<b>Daytime Tel No</b>	

<b>Declaration</b>	
<b>I can confirm that, to the best of my knowledge, the information given above is correct</b>	<b>Signature</b>
	<b>Date</b>

**Send your completed application to:**

**Andrew Smyth**  
**Sports Development Officer (People with a Disability)**  
**West Lothian Council**  
**Sports Unit**  
**Balbardie Park**  
**Torphichen Road**  
**Bathgate EH48 4LA**



<b>For Official Use Only</b>		
Date Received.....	Reference.....	Quotes.....
Acknowledged.....	Bank Statement.....	Fees.....
Previous Grant .....	Constitution.....	Decision.....
Accredited Club .....		