

Application Form

SECTION : 1

ALL APPLICANTS (Please type or complete in Block Capitals)

1 Name of Organisation _____

2 Name of Contact _____

3 Position of Contact with Club or Organisation _____

4 Contact Address _____

5 Telephone No (Daytime) _____

6 Sport/Activity _____

7 Organisation/Club Training Location _____

8 Have you remembered to send? _____

The organisation's constitution

Bank details including your last financial statement

Evidence of Equal Opportunity and Child Protection Policies

9 Are you affiliated to? _____

Sports Council for Glasgow

National Governing Body

Other

10 What is the grant for? _____

Brief description _____

Project date _____

Project venue _____



Application Form

SECTION : 2

1 Name of Organisation

	MALE NUMBERS	FEMALE NUMBERS	£ JUNIOR SUBSCRIPTION	£ ADULT SUBSCRIPTION	£ TOTAL
Senior Player					
Senior Non-Player					
Junior Player					
Junior Non-Player					
TOTAL					

2 Please give full details of the project (i.e. the aims and objectives of the project; who the project is for; how the project will be delivered)

3 How will Glasgow and the Club/Organisation benefit from the project?



