



# SHREWSBURY TOWN COUNCIL COMMUNITY GRANTS FUND APPLICATION

Please answer all questions which are relevant to your organisation -- failure to do so may result in a delay in the determination of your application

<b>PROJECT</b> T (In no more than 25 words)	<b>GRANT AMOUNT REQUESTED</b> D	<b>£</b>
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STAIRLIFT  
£3000-00

### Contact Details

Q1 Name of organisation making application: OLD SHREWSBURY BOWLING CLUB

Name of contact for this application

Title: MR First Name: TERRY Surname: EVANS

Position held in the organisation: CHAIRMAN

Contact Address including full postcode:

100-100  
.....  
.....  
.....

Postcode:

Contact Telephone Number: .....

Email address: .....

### About your organisation

Q2 What type of organisation are you?

Tick (U) relevant category:

Registered Charity: ( ) Charity Registration Number

Voluntary Organisation: ( )

Company Limited by Guarantee: ( ) Company Number

Other - Please specify:

SPORT CLUB

Q3 When was your organisation established?

1906

Q4 Briefly describe your organisation.

Describe your organisation, including how many members/users you have, whether there is a subscription fee and the usual activities/services you provide.

If you are a new organisation, describe the services/activities you plan to provide.

WE ARE A CROWN GREEN BOWLING CLUB AND BOXING CLUB WITH 160 BOWLING MEMBERS WITH 90 MEMBERS OVER 70 YEARS OLD THE MEMBERSHIP FEE IS 50.00 PER YEAR

Q5 If you are a subsidiary of a larger organisation, please state which one.

Q6 Does your organisation have an agreed Constitution or Memorandum of Association?

Please state which and attach a copy:

Q7 What is your primary source of funding?

MEMBERSHIP FEES

Details of the project or activity you are planning

Q8 Describe the projects/activity you plan to use this grant for.

i) Try to be specific about what you will do and how you will do it.

WE WANT TO INSTAL AN OUTSIDE STAIR LIFT SO THAT MEMBERS AND PEOPLE WHO WANT TO BECOME MEMBERS CAN ACCESS THE MAIN AREA

ii) Please state how you have identified this need and how the project will benefit the people of Shrewsbury, together with the estimated time span. If you are seeking continuation funding for this project, please provide evidence for this continued need.

WE WANT TO OPEN UP OUR ROWLING CLUBS TO OTHER ORGANISATIONS SO THAT WE CAN USE GRANT FOR DISABLED CLUBS

iii) How many people from the Parish of Shrewsbury do you expect to benefit directly from your project or activity?

200+

Q9 What criteria will be used to measure the success of the project and how many people from the Parish of Shrewsbury do you expect to benefit from it?

WE WILL HAVE OPEN DAYS FOR THE PUBLIC AND ALSO INVITE CLUBS THAT HAVE SENIOR CITIZENS

### Health & Safety

Q10 What, if any, special safety issues are related to your project/activity?

Please provide the following information –

i) What kind of insurance does your organisation have?

FULL BUILDING AND CONTENT + PUBLIC LIABILITY

ii) Do the leaders have the relevant qualifications and/or experience?

YES THE MANAGEMENT TEAM

iii) What policies does your organisation have in place (i.e. Health and Safety, Child Protection/Safeguarding, Working with vulnerable adults, Equal Opportunities, CRB Checks etc.)? You may be required to submit copies of your policies

HEALTH SAFETY  
CHILD PROTECTION/SAFEGUARDING  
CRB CHECKS

## Funding of your project

### Q11 Previous Applications

If you have applied for and received funding from Shrewsbury Town Council in the past please provide details of the amount, the year and briefly what the funding was used for.

Year	Project Description	Award £

### Q12 Project Funding

Please provide details of the amount of funding you need for your project and give us a breakdown of what the money is for (please enclose any relevant estimates or details).

Tell us the amount of grant requested £..... and provide a detailed breakdown as to how you have reached this figure

Project Expenditure Please list all items of expenditure for your project	Amount of Project
STAIR LIFT OUTSIDE	£ 2800
ELECTRIC'S INSTALMA	£ 700
	£
	£
	£
<b>Total</b>	£ 3500
Project Income Please list how the project shall be funded	
GRANTS	£ 2500
CLUB FUNDERS	£ 1000
	£
	£
	£
<b>What is the difference?</b> This should be the same as the amount of Grant you are applying for	£ 2500

### Q13 Covering a Shortfall



If the Town Council makes an offer less than the amount requested, how will that impact on the Project and how will you cover the shortfall?

WE WOULD HAVE TO LOOK FOR OTHER FUNDING FROM SPONSORSHIP BUT AS YET WE HAVE HAD NO LUCK WITH THAT

**Q14 Sustainability**

What plans do you have in place to ensure that your organisation becomes more sustainable and less reliant on grant funding, particularly from the Town Council

WE ARE BUILDING A VERY STRONG MANAGEMENT TEAM THAT IS VERY FORWARD THINKING AND ARE LOOKING AT PUSHING OUR CLUB FORWARD IN THE COUNTY

**Your Accounts**

**Q15 Please provide the following details from your most recent annual accounts**

Total Income	£	<del>31943</del>	31943-58
Less Total Expenditure	£		25598-55
Surplus / Loss	£		6345-03
Savings (Reserves, Cash, Investments) £			5000-00

*Please provide a copy of your most recent annual audited accounts or, in the case of newly established organisations, the projected income and expenditure for the next twelve months.*

You need to include these documents with this application.

**Account Details**

**Q16 Please give us your bank or building society account details**

You can only apply for grant if you have a bank/building society account in the name of your organisation. We will only pay grants into an account which requires at least two people to sign each cheque or withdrawal. These people should not be related.

Account name:

.....

Bank/building society name:

SHREWSBURY

Bank/building society address....

Who are the signatories and what position do they hold in your organisation?

- 1 Name ..... Position CHAIRMAN
- 2 Name ..... Position SECRETARY
- 3 Name ..... Position TREASURER

**Any Other Information**

**Q17** Any other information which you consider to be relevant to your application.

IN APRIL 2019 A NEW MANAGEMENT TEAM TOOK CONTROL OF OLD SHREWSBURY AND ARE IN THE PROCESS OF UPGRADE WITH HOPEFULLY THE HELP OF GRANTS AND FUND RAISING

**Declarations**

**Q18** Declaration

Please give details of a senior member of your organisation. For example, this may be your Chairperson, Treasurer or Secretary. They must read the application and sign below. (This must not be the main contact name in Q1).

I confirm, on behalf of OLD SHREWSBURY BOWLS CLUB (insert name of organisation):

That I am authorised to sign this declaration on its behalf, and that, to the best of my knowledge and belief, all replies are true and accurate.

I confirm that I have read the Terms and Conditions set out in the Notes which accompanied this application and further confirm that this application is made on the basis that if successful, the organisation will be bound to use the grant only for the

purpose specified in this application, and will have to comply with those Terms and Conditions and any others which the Council might attach to the Grant.

Post held in organisation: CHAIRMAN

Title: First Name: Surname:

Organisation address:

Postcode:

Telephone: Date: 7-MARCH 2020

**Q19 Signature of Person Completing the Application**

This must be the signature of the person named in Q1 as the main contact and not be the same person who has signed in Q18

*I confirm that, to the best of my knowledge and belief, all the information in this application from is true and correct. I understand that you may ask for additional information at any stage of the application process.*

Signature: Date: 7-MARCH 2020

**Checklist**

- 1. Have you answered every question?
- 2. Have all signatures been completed?
- 3. Have you included a copy of your constitution?
- 4. Have you included a copy of your most recent audited accounts?
- 5. Please state any supporting documents you are submitting: