

Caithness Sports Council

START UP GRANT APPLICATION

The Purpose of the Grant

Financial assistance may be offered to recently formed Clubs who have a constitution. Such Clubs MUST be affiliated to the Caithness Sports Council.

Conditions of offer:

Refer to Guidance / Information Notes

1. Your Contact Details

(The contact must be able to answer all the questions relating to this application)

Club Name _____

Date of Formation _____

Venue for Activities _____

Club Website _____

Chairperson's Name _____

Chairperson's Address _____

_____ **Postcode** _____

Telephone Number _____ **Work / Home / Mobile¹**

Email Address _____

¹ Delete as appropriate

For Official Use Only

Date Received: _____

Grant Number: _____ Minute Reference: _____

Amount Offered: _____ Amount Paid: _____

Cheque Number: _____ Cheque Reference: _____

Secretary's Name _____

Secretary's Address _____

_____ Postcode _____

Telephone Number _____ Work / Home / Mobile¹

Email Address _____

Treasurer's Name _____

Treasurer's Address _____

_____ Postcode _____

Telephone Number _____ Work / Home / Mobile¹

Email Address _____

Other Committee Members

Name	Address	Tel No
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. Your Membership

	Current Number	Membership Fee
Under 18's (Junior)	_____	_____
18 & over (Adult)	_____	_____

3. How Will the Start Up Grant Be Used? (Please Describe)

Description Amount

Bank Details

Bank Name

Bank Address

Sort Code

Account Number

Name of Account

5. Declaration

I have read and understand the conditions of offer of assistance and I agree to abide by these conditions. To the best of my knowledge and belief the information given in this application is correct.

Signed

Status²

Name

Date

² Must be an officer (Chairman / Secretary / Treasurer) of the Club.