

The Chalvington Trust: Grant Application

Please print out and complete. Scan and EMAIL to roger.dennien@gmail.com

OR POST to 3 Church Lane Cottages, Ripe, East Sussex. BN8 6AU.

Closing date for receipt of applications is 31st May.

*Please include proof of address and **proof of costs or supporting information for the funding request. Scanned or copies of original documents are accepted – do not sent original copies as we cannot guarantee returning these.

Please complete this section using CAPITALS

Full Name of Applicant:

D.O.B (if under 18 years): ____/____/____

Full Name of Parent (if applying on behalf of a child):

Residential Address:

Postcode:

Email Address:

Contact Phone Number (for parent):

Please outline the purpose of funding**

Total Cost of the Activity/Project: £

Amount of Grant Required: £

Date Required By: ____/____/____

Details of any other Funding Received:

I declare that the above details are correct to the best of my knowledge and I hereby make an application for funding.

I understand that the Trustees are not under any obligation and I agree to abide by their decision.

Signature:

Date: ____/____/____

Printed Name: