

BINGHAM TOWN COUNCIL

APPLICATION FORM FOR COMMUNITY GRANT AID

Please read the Community Grant Aid Policy attached before completion of this form

| Name of group | MOLLIFE AND BINGHAM ADVICE CENTRES |
|--|---|
| Name, address and contact information of person submitting the application | PAND HANDLY, HAN TREASURER. |
| Membership of the Group | Under 18's |
| Information/history about your group | complete and the second of the form |
| State the purpose for which financial assistance is sought and confirm how much is being requested in grant funding. (costing's/quotes to be included) | |
| Is the group making a financial contribution or providing evidence of any fundraising | Les the have their employees and their as |
| Provide information on the benefit to Bingham residents if an award was made and an approx. number benefitting | Francisco Santano estados paras procesos. |
| Details of other grants applied for or awarded to the group over the last twelve months | Time: Paper The Court State 2000 |