# Please complete this application form and return it to the Carnival Treasurer

**Malmesbury Carnival Committee
Application for Funds 2021**

**by email to** grants@malmesburycarnival.co.uk **(preferred - or by real mail to
Will Taylor, 15 Burnivale Malmesbury SN16 0BL).**

**You will be contacted to confirm receipt of your application within 2 days, please follow up via email if you don’t hear from us. A docx form of this is available – please email as above, and return as a pdf for security.**

* Closure date for grant applicationsis **30th September 2021,** late entries are not accepted
* Please complete this form **clearly**.
* Please note that Carnival does not normally provide funds for:

 (a) General running costs (b) Individuals (c) other fund giving bodies

 (d) Commercial Organisations (e) Items that have already been purchased

* Preference for funding requests will be given to applicants supporting activities within the local Malmesbury area (as defined by the Malmesbury Secondary School catchment area)
* Applicants **MUST** provide a contact telephone number and e-mail address
* All grants must be claimed by 1st November 2023. No reminders will be issued.
* Grants will be paid by Carnival on proof of payment or proceedable quotation/estimate for the goods or services for which the grant was applied, please note that you can only purchase the equipment requested in your grant application it is not transferable to another project.

Malmesbury Carnival is a registered charity. Charity number 1144055

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| Please do not write in this boxApplicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- |
| Grant awarded – yes / no | Amount requested:  | Amount awarded:  | Amount used: |
| BACS Transfer | Amount | Date |
| .BACS Transfer | Amount | Date |

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| --- | --- |
|  | **Application for Funds 2021** |
| **Name of organisation:** |  |
|  |  |
| **Name and address of correspondent:** **Position in Organisation****Contact telephone:****E-mail** |     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| **General aims of the organisation or project:** |  |

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| --- | --- | --- |
| **History** | Has your organisation previously requested fundingIf yes, in which year(s) did you apply? | Yes / No / Don’t know |
|  |  |  |
|  | Has your organisation ever been granted funding by Carnival? If yes, in which year(s) was funding granted and for what amount(s) | Yes / No / Don’t know |

|  |  |
| --- | --- |
| **Purpose for which funds are required. Please be as precise as possible and provide quotes/estimates where applicable** |  |
|  |  |
| **Total number of people that will directly benefit if the funding is granted:**  |  |
|  |  |
| **Total amount that you wish to request from Carnival funds:**  | £For your application to be considered you **must** **request a specific sum of money**.  |
|  |  |
| **Total cost of project towards which Carnival funds are being requested:** |  |

|  |  |
| --- | --- |
| **What other sources of funding have you sought / are you seeking?** |  |
|  |  |
| **What will happen if you do not reach yourfund-raising target?** |  |
|  |  |
|  | **We are always keen to promote the organisations that Carnival helps. This would include inviting your organisation to participate in next year’s Procession. Please indicate whether you would be willing to join in to show the Community what your organisation can do! This can be a motorised or walking entry. Details will be found on the Entry Form available in the new Year** |
|  |  |
| **Please advise Bank Account Name, and please include Sort Code and Account Number – we prefer to transfer funds by BACS.**

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| **Account Name:****Sort Code:****Account Number:** |

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**Please note that an application for funds does not guarantee that the Committee will be able to make an offer of funds.**

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| **Signature: Date:**  |

**You will be notified of the Committee’s decision whether to fund your application by the 31 October 2021, but funds will not be available till the AGM in December 2021 when our accounts have been audited.**