

ELMLEY SMALL GRANTS ARTS FUND

Events and Activities Grant Application

Reference Number (for office use only)

PLEASE BE SURE TO READ THE EVENTS AND ACTIVITIES GRANT GUIDELINES BEFORE YOU START FILLING IN THIS FORM

Organisation

Contact Name

Address

.....

.....

Post Code

Email

Telephone

WHO ARE YOU?

WHAT DO YOU WANT TO DO?

Please describe what you are planning to undertake. If you are planning a series of activities, please attach an outline of the programme listing proposed events, dates and venues.

WHY DO YOU WANT TO DO IT?

What are your aims?
How will you judge whether you have achieved them?

WHERE WILL IT HAPPEN?

Priority will be given to projects in areas where there is little or no existing arts activity. Please tell us about your area.

WHEN WILL IT HAPPEN?

Please give dates.

Start: Finish:

IS THIS NEW WORK?

Priority will be given to projects which result in new arts work, encourage new participants in the arts or increase the level and quality of arts work in the area.

WHO WILL BE INVOLVED?

Priority will be given to projects which encourage new audiences or participants in the arts, particularly from those sections of the community which might otherwise have little opportunity to get involved in the arts.

Who will organise it?

Who are the intended audience or participants?

How many people will be involved?

As audience? As participants?

WHICH PROFESSIONAL ARTISTS WILL BE INVOLVED?

How many professional artists/arts workers will be involved?

Who are they?

Who chose them?

PUBLICITY

Even if the project is very local, you will want to tell people it is happening. How will you do this? How will you encourage participation from people who do not normally take part in arts activities?

ABOUT YOUR ORGANISATION

Please use the space opposite to tell us about your group. You do not need a constitution, but must be able to satisfy us of your ability to maintain proper financial and administrative control.

When was your group established?

Is it a registered charity? YES/NO If yes, give number

Does the group have a constitution? YES/NO

If not, how is your group run?

.....

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BANK ACCOUNT

Please give details of your group's bank account.

Account name
Account no: Bank sort code:

When should the grant be paid?

INDEPENDENT REFEREE

Please give us the name of an independent referee. He or she must not be a member of your group nor related to a member of your group. However, your referee needs to be someone who knows your group and can talk about your work in a professional capacity.

Name

Occupation/status

Organisation

Address

Email

Telephone

Please send the reference request form to your chosen referee.

We understand and agree that:

If given a grant, it will be used exclusively for the purposes set out in the application. No major change will be made to how we use the grant, without prior agreement. The grant will not be increased in the event of any overspend. If we do not spend the entire grant on this project, the underspent amount will be returned promptly.

We will complete and return an evaluation report within 6 weeks of completion (including full details of income and expenditure).

Failure to meet these conditions will mean that future applications from our organisation will not be considered.

Declaration

I confirm that I am authorised to sign this application and that, to the best of my knowledge, all replies are true and accurate.

Signed

Position in organisation

Name (please print)

Please ensure a copy of your most recent annual accounts, signed by two members of your group, is submitted with your application.

RETURNING THIS FORM:

Please send the reference request form to your chosen referee and ensure it is returned to the address below by the due date.

When you have completed this application form, return it by the date indicated to:

**Elmley Small Grants Arts Fund Administrator
Community First
Malvern View
Willow End Park
Blackmore Park Road
Malvern
Worcestershire WR13 6NN**