



# **BOGNOR REGIS TOWN COUNCIL**

## **GRANT AID APPLICATION FOR APRIL 2027**

**IMPORTANT NOTICE - ONLY applications received in **electronic format** by email can be accepted. Please attach a **statement of either audited or certified accounts for the last complete year, copies of current bank statements for all bank accounts, a signed copy of the Chairman's or Secretary's report** and any other supporting documents you may wish to send. Please read questions carefully and provide a full answer.**

1. Name of your organisation

2. Name, address, postcode and daytime telephone number of person applying including position in Organisation

|                           |
|---------------------------|
| Name:                     |
| Address:                  |
| Postcode:                 |
| Daytime telephone number: |
| Position in organisation: |

3. Does your Group/Organisation have a constitution or set of rules? - **Please enclose a copy if applicable**

|              |                              |                             |
|--------------|------------------------------|-----------------------------|
| Please tick: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
|--------------|------------------------------|-----------------------------|

4. Please tick the relevant information and supply the appropriate number

|   |                 |
|---|-----------------|
| Registered Charity: Yes <input type="checkbox"/>        | Charity number: |
| Company Ltd. by Guarantee: Yes <input type="checkbox"/> | Company number: |
| Other (please specify):                                 |                 |

5. Please supply the following information

|   |     |    |
|---|-----|----|
| Is your organisation's main base located within the five Wards of Bognor Regis (as identified on the enclosed map)? | Yes | No |
| When did your group/organisation start? (MM/YY)   |     |    |
| How many members do you have?   |     |    |
| How many people use this service?   |     |    |
| How many are Bognor Regis residents located within the five Wards (as identified on the enclosed map)?              |     |    |

6. Briefly describe the main purpose of your group/organisation. Please continue on additional sheet if necessary

7. Please tell us if you are a branch of, or related to a larger organisation

8. Does your organisation come into contact with children, or vulnerable adults?

Please tick:      Yes                       No

If yes, please provide a copy of Child Protection Policy and/or Vulnerable Adult Policy.

If copy of policy is not available, please explain why:

9. Please confirm the amount of the grant requested from the Town Council and enclose an estimated cost of proposals/project (please attach copies of estimates and costs - where the application is for new equipment that is over £100 in value, please supply at least two quotations)

10. Please confirm the amount of unrestricted reserves that your organisation holds

11. Please give an explanation as to why, instead of applying for a grant, the reserves identified in 10 above, cannot be used by your organisation for the proposals/project

12. Purpose of the grant - please show how this will meet the Town Council's Strategy and priority headings as listed in the Grant Awarding Policy.

13. Show how costs of proposals/projects are to be met. Please continue on an additional sheet if necessary

14. Details of other grants/funding applied for/to be applied for/obtained

15. Are there any safety issues related to your project or proposed activity and do you hold a current Public Liability Insurance?

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| Details of any safety issues:  |
| Public Liability Insurance: Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Amount held:   |

16. Have you applied for funding from Bognor Regis Town Council before? - If so, please give details of applications below. Please continue on additional sheet if necessary

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17. The Town Council is keen to hear about the impact and benefits arising from the Grant Aid awards. Therefore, if your application is successful, the Town Council will require a commitment from you to promote the support that you have received from the Town Council by including the logo that will be supplied to you in any promotional material that you produce of which you are required to provide the Town Council with electronic or hard copies. We will also be in touch with you, in due course, to request the following: feedback on the success of the event/initiative; a breakdown of the budget; the provision of photographs showcasing events and initiatives that the Town Council can share on their social media platforms.

Please indicate below whether you anticipate that your event/initiative will be completed within 6 or 12 months of the funds being awarded, so that you are contacted at the appropriate time

|                                   |                                    |
|-----------------------------------|------------------------------------|
| 6 months <input type="checkbox"/> | 12 months <input type="checkbox"/> |
|-----------------------------------|------------------------------------|

18. The Town Council is always seeking feedback to improve the service it provides. Therefore, please tell us what you think of this application form and give any suggestions as to how you feel it may be improved

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**DECLARATION:** I declare that I have read and accept the Guidelines, Criteria and Checklist and that I have answered all the questions fully and truthfully. I also declare that any grant made will be used solely for the purposes outlined in this application. I understand that Bognor Regis Town Council reserves the right to reclaim the full grant in the event of it not being used for the purpose specified.

**DATA PROTECTION:** By making an application for funding from Bognor Regis Town Council, you agree that your contact details may be held and processed for the purpose of corresponding and assessing your funding application.

Bognor Regis Town Council usually contact previous applicants regarding Grant Aid, regardless of whether the application was successful or not. Please tick here [ ] to confirm you are happy for us to retain your details to enable us to contact you in the future in this regard only.

Bognor Regis Town Council's Privacy Notice may be viewed on our website. Alternatively, please email [clerk@bognorregis.gov.uk](mailto:clerk@bognorregis.gov.uk) to request a copy.

**PLEASE COMPLETE BELOW TO FINISH YOUR APPLICATION**

Name..... Position.....

Date.....

Email address.....

Organisations website (if applicable).....

Please complete this form and return via email as soon as possible and **no later than 5.00pm on Thursday 12<sup>th</sup> November 2026**, with all required documentation as outlined to:

Town Clerk  
**BOGNOR REGIS TOWN COUNCIL**

[clerk@bognorregis.gov.uk](mailto:clerk@bognorregis.gov.uk)