



## APPLICATION TO THE COMMUNITY CHEST

(Please refer to explanatory notes  
before completing this form)

1. Name of Project or Group
2. Main contact person Tel: Address:  E-mail
3. Please tell us about your project
4. Will anyone else be involved in helping to carry out the project or activity? (tell us who and what they will do)

5. How much *Community Chest* money are you asking for? Please give a breakdown of how you will spend the grant. (maximum £500 minimum £50)

6. What difference will your project/ activity make?

7. Does your project already receive funding? If so how much and from who.

8. If the project goes well, how will you keep it going or develop it in the next few years?

9. Have you ever done anything like this before? Tell us about any projects you have been involved in and any skills you feel you have to help make this project happen.

10. Please give the name and contact details for two people we may use as referees (they should not be related to you in any way)

11. I understand that completion and submission of this form is not a guarantee of funding and that I will be notified by Bletchley and Fenny Stratford Town Council in writing should a grant be approved.

Signed

Name (please print)

Please return completed form to Lisa Courtney, Town Clerk,  
Bletchley and Fenny Stratford Town Council, 74-76 Queensway,  
Bletchley, Milton Keynes, MK2 2SA