TUTBURY PARISH COUNCIL



12-18 years

9 PINFOLD CLOSE TUTBURY BURTON UPON TRENT STAFFORDSHIRE DE13 9NJ Telephone: 07486 406045 Clerk Karen Duffill

theclerk@tutburyparishcouncil.gov.uk www.tutburyparishcouncil.gov.uk

Grant Application Form				
Name of organisation/applicant:				
Contact person:				
		Email:		
Purpose of grant (con	ntinue on a separate shee	t if needed):		
Categories (tick all the	iat apply):			
Older People	Young People Older People			
 Arts and Culture Charitable advice, guidance, or education 				
Enhancing the		ı		
C	ofile of Tutbury			
	ent or celebration			
_	reational activities			
1 0	veloping activities or service	ces in Tuthury		
1 0	able or disadvantaged grou	•		
Project start date: Finish date:				
	ouncil grant applied for:			
	on's own contribution: £			
Approximate benefic				
Age Group 0-12 years	In Tutbury	Outside Tutbury		

Age Group	In Tutbury	Outside Tutbury					
19-50 years							
50+ years							
All ages Specify minority group (if a	nv)						
Account name payable to (name): Bank Details Bank name Sort Code							
					Account Number Alternative address (if different):		
Supporting Documents (tie	ck):						
Bank statement to sh	now evidence of the acc	ount sort code and account nu,ber.					
• Minutes or evidence	of organisation structure	re					
 Audited accounts or 	budget plan						
• Charity registration	(if applicable)						
 Project plan 							
• Other (specify):							
Declaration:							
I declare that the informatio be used solely for the purpo		correct and that any grant aid received will					
Signed:							
Name (print):							
Position: Date:							
Please return completed app	lications to:						
Karen Duffill, Clerk to Tuth	•	11.					
9 Pinfold Close, Tutbury, B Email: theclerk@tutburypar	1 '	ordshire					
ypui	Total Controlling Controlling						

Review and Approved: May 2025

(Next Review: May 2026)