

Berwickshire Sports Council



Funded by Scottish Borders Council

GENERAL GRANT SCHEME

APPLICATION FOR FUNDING

Use this form for if you are a group or club

For funding for individuals please complete a Sports Award Scheme application form

Please read the Guidance Notes carefully before completing this application form
PLEASE ANSWER EACH QUESTION IN BLACK INK IN THE SPACE PROVIDED – DO NOT SAY ‘SEE ATTACHED’

PART 1 – ABOUT YOUR GROUP

1. Name of your group/club as it appears on your constitution or set of rules

2. Where is your group/club based?

3. If you have premises, are they licensed?

4. Are you a member of a Sports Council, if so which?

5. Has your group/club been affiliated for more than 12 months YES NO
(Please note your group/club must have membership for a minimum of 12 months to be eligible to apply)

Details of main contact for this application.

Name:
Position held in group/club:
Address:
Postcode:
Telephone:
E-mail:

6. Details of Group/Club Secretary, if different from above.

Name:
Address:
Postcode:
Telephone:
E-mail:

7. When did your group/club start?

8. How many committee members are involved in running your group/club?

9. Are any Scottish Borders Council Councillors and/or Officers involved in running your group/club? If so please give names.

10. What type of group/club are you?

Unincorporated club, association or community group
 Company limited by guarantee
 Company limited by shares
 Trust
 Charity recognised by the OSCR Charity number SC_____

11. Are you a member of your Governing Body of Sport. Yes/No

Name of Governing Body
Registration Number
Has your group/club implemented your National Governing Body Club Mark/Quality Mark Scheme? YES/NO

12. What does your group/club do and what type of activities do you deliver?

13. Tell us how your group/club encourages, develops or promotes sport? Refer to local sports plans, if appropriate. (Also include details of how you develop your Junior/Youth sections)

14. Tell us about the membership of your group/club.

MEMBERSHIP	JUNIOR	SENIOR
Numbers		
Fees, Annual		
Fees, Daily/Weekly		

15. What are your bank account details.

Account name:	
Bank or building society name:	
Address:	
Post code:	
Sort code:	
Account number or Roll number:	
How many people have to sign each cheque or withdrawal from this account? <i>(Minimum of two required)</i>	
<i>(List all the people who are authorised to sign each cheque or withdrawal from this account – no-one should be related.)</i>	
Name:	Position in group/club:
Name:	Position in group/club:
Name:	Position in group/club:
Name:	Position in group/club:

16. What grants have you received in the last 5 years?

(Include Scottish Borders Council Grants, Sports Council grants, lottery grants etc)

Date	Grant Scheme	Project Title	Amount

17. Tell us what your total savings/cash or investments are (all accounts)

(See Application Notes for explanation of 'savings')

£

18. Tell us how your group/club takes account of equal opportunities legislation.

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NB If you have an Equal Opportunities Policy please let us have a copy of this

19. If your group/club works with children or vulnerable adults tell us about the policies you have in place to protect them.

NB If you have a Child Protection Policy please let us have a copy of this

PART 2 – TELL US WHAT YOU ARE APPLYING FOR
(You can continue each question on no more than one side of A4)

21. Tell us about your project and what you will actually do with the grant.

22. Tell us about the expected results of your project and the difference this will make to the encouragement, development or promotion of sport in the Borders *(refer to local sports plans if relevant)*

23. Tell us how you know there is a need for your project. Include details of any consultation or research you have undertaken.

24. When is your project due to start?

25. If your project involves work to a building or land:-

Who owns the land or the building you plan to work on?

Do you have any of the following?

A lease or agreement to use the land or building (Date of lease ___and period outstanding ___ years)

Planning permission (Reference No: _____)

Written permission of the owner

26. Tell us how much money you need for your project?

What is the total cost of your project?

£

How much do you need from your Sports Council?

(See guidance note for funding limits in your area)

£

Give the breakdown of your **total** project costs.

Items of expenditure	£
TOTAL	

Tell us which Item(s) of Expenditure your Sports Council will assist with?

(Copies of quotations/ estimates must be supplied for the costs you are applying for)

	£

If the total project cost is more than you are requesting from your Sports Council, tell us where the rest of the money will come from

Funding Body	Amount	Progress

How much will your group/club contribute to the project?

(Include in-kind (such as volunteer time, donations or equipment), if relevant)

PART 3. Completing your application

27. We wish to apply for a grant from the Sports Council and have fully examined all other relevant sources of funding. The answers to the questions in this form accurately reflect our group/club, its finances, our project and grant request. We will co-operate with the monitoring of any grant made to us and comply with the terms and conditions of the scheme.

To be signed by the main contact listed in Part 1

Signed:
Position in group/club:
Date:

To be signed by an office bearer of the group/club. (this must be a different person from the one above)

Signed:
Position in group/club:
Date:

To be signed by representative from the National Governing Body

Signed:
Position:
Date:

IMPORTANT

Your application can only be considered if all the questions on this form are completed and the appropriate people have signed the form. You must also provide the documents listed in the following checklist:

- A copy of your constitution or set of rules, dated and signed.
- An original bank statement less than three months old.
- A copy of your most recent annual accounts, dated and signed as approved (these should be no more than 18 months old - new organisations should submit estimates of income and expenditure for the first 12 months)
- Copies of quotations/estimates for the work to be funded.
- Child protection Policy/Equal Opportunities policy

Please Note: Constitutions or set of rules, bank statements and annual accounts should all be in the same name

This completed form and attachments should be submitted to the contact detailed in the attached guidance notes.

You can get this document on tape, in Braille, large print and various computer formats by contacting the address detailed below:-

**The Secretary
Berwickshire Sports Council
Sports Development Unit
3 St John Street
Galashiels
TD1 3JX
Tel: 01896-756274
Fax: 01896-759716
Email: nrenton@scotborders.gov.uk**

Our Scottish Borders
Your challenge