# Sport and physical activity grant application

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You can use this Word version of the form to prepare your answers before submitting the online form on our website.

You will need to complete and submit the online form on our [Sports Grants](https://www.warwickdc.gov.uk/sportsgrants) pages.

## Eligibility Criteria

* Your group has a bank account (we cannot pay money into individual’s accounts) and have in place either a constitution, articles of association or terms of reference
* Your group is not for profit i.e. a registered charity, a voluntary or community group, or a club or society
* Your project/event/purchase will be delivered in at least one of the following areas or will mainly benefit residents from these wards: Leamington Brunswick Ward, Leamington Willes Ward, Whitnash Ward.
* Your project/event/purchase requires a one-off payment (we cannot provide ongoing funding support). The maximum amount of grant that can be applied for is £2,000
* Your project/event/purchase has not already started or been completed
* You have all the following policies and procedures in place: safeguarding, health and safety, equality and diversity, data protection and public liability insurance
* You have got or will have in place the correct level of insurance, to deliver the activity you are applying for funding for
* Your application is not for capital costs such as repair or enhancements of a building
* Your application is not for building renovations/works or refurbishments, ground works or resurfacing, refreshment/food, or bursaries for individualsBottom of Form

Confirmation*(Required)*

I confirm that we meet all of the eligibility criteria as stated above

## Applicant details

Beneficiary Registration Number (if applicable)

For example, this might be the company or charity registration number

Voluntary and community sector category (Required)

* Registered with Companies House
* Charity or Charitable incorporated organisation
* Community Interest Company
* Industrial and provident society
* Housing association
* None of the above

Name of group/organisation (Required)



We need to take some details of the person completing this form. This person will be responsible for:

* providing extra information if requested
* the grant money
* signing the grant agreement
* providing evaluation/feedback

Name (Required)



Email address (Required)



Telephone number (Required)



Postal address (Required)



## Group/organisation details

Please briefly explain what your group/organisation does (e.g. youth club, charity) and your aims & objectives (Required)



Please provide your charity number (if applicable)



Please provide your VAT number (if applicable)



Does your group have its own bank account? (Required)

* Yes
* No

If yes, please attach a copy of your latest bank statement showing account detail and balance (Required)

If you are a sports club, do you have your National Governing Body Club Mark Accreditation? (Required)

* Yes
* No

N/A - not a sports club

If yes, Date awarded*(Required)*

Are you working towards accreditation?*(Required)*

* Yes
* No

How many members/service users are currently involved in your group/organisation?

Number of users?

* Women (18+):
* Men (18+):
* Girls (0-17):
* Boys (0-17):

How many paid staff do you have? (Required)



How many volunteers do you have? (Required)



## Project information

Please note: there is a 20-minute timeout on this page, so please complete this question within the 20-minutes to avoid losing the information. You can click Next, and then Previous on the next page to get back to this question if you need to.

Project title (Required)



Which geographical area will the project focus on? If you are going to operate from a building, please tell us where it is? (Required)



What is the planned timescales for the project, including when you expect it to start, dates of key activities, and when the grant will be spent by? (Required)



Please attach any evidence you have collected to support the need for this project e.g. consultation feedback

## Tell us about your project

Please note: there is a 20-minute timeout on this page, so please complete this question within the 20-minutes to avoid losing the information. You can click Next, and then Previous on the next page to get back to this question if you need to.

Tell us about your project. (This should describe what you want to do with the money and explain how it meets the relevant criteria) (Required) (Required)



## The need for the project

Please note: there is a 20-minute timeout on this page, so please complete this question within the 20-minutes to avoid losing the information. You can click Next, and then Previous on the next page to get back to this question if you need to.

Please tell us how you know there is a need for the project. (Required)



## Further project information

Please provide details of any other groups/organisations who will be working with you on the project and what they will bring to it.



What age group(s) will benefit from the project? Tick all that apply. (Required)

* 0-8
* 9-14
* 15-24
* 25-35
* 36-50
* 51-65
* 66+

How would you describe the people who will benefit from the project? Tick all that apply. (Required)

* People living in urban areas
* Disabled people
* Unemployed people
* Women and girls
* Ethnic minority groups
* Older people
* Children and young people
* Other

Project contacts – please list the estimated number of individual contacts the project will make, if possible provide a breakdown of the categories ticked above (Required)



## Financial details

How much money are you requesting from the fund? (Note: a maximum of £2K can be applied for) (Required)



Please provide a simple breakdown of what you will spend the grant money on including the items, cost of those items and the total. (Required)



Is this the total cost of the project? (Required)

* Yes
* No

If no, Please give details of how you will find the balance stating details of any other grants you have applied for or use of your own resources. Please also state what any additional funding will be used to pay for.*(Required)*



## Confirmation of details

Confirmation (Required)

Please tick to confirm that the information you have provided is accurate and correct