

Leek and District Sports Council.



Small Grant Claim Form (Year)

Please complete the form in Block Capitals - Black Ink Please.

Before completing the form please read the criteria for making grants in the Sports Council Terms and Condition.

Section 1 – Your Details		
Name of Club or Organisation		
Name of Applicant		
Position in Club		
Address		
Post Code		
E mail address		
Telephone Day	Evening/mobile	
Section 2 –About your Club		
What number of members	Older people (over 65)	
do you have in these categories	Seniors (25-65)	
	Young people (16-24)	
	People with Disability	
	Juniors (under 16)	
	Women & Girls	
	Others (please specify)	

Secretary: Mrs Christine McFadden.

Tele 07779 262822

Chairman: Mr B Pickering Tele 01538 371524 www.leeksports.co.uk

Treasurer: Mr J M Lilley

Tele 01538 373400

What	What % of members live in Moorlands				
Are you affiliated to National governing body for your	YES	NO			
Sport/physical activity if so please provide details					
3. Project information					
What are you seeking funding for -					
Diagon quitimo hous sour application					
Please outline how your application					
meets one or more of the following					
criteria and Tick as appropriate below Improving health e.g. fitness & mobility	YES	NO			
Increased participation	YES	NO			
Increased competitive participation	YES	NO			
Improving quality of life in Leek & District	YES	NO			
Increasing sporting skills in the District	YES	NO			
Help reduce health inequalities	YES	NO			
How many people do you expect to benefit	120	110			
directly from your project.					
What are the expected age ranges (see 2 above)					
Section 4 About the Project					
 Please describe the benefits your Club 					
expect to gain from the project					
 How does the project support the 					
development of your sport/physical activity					
Is your Club seeking funding from other sources	YES	NO			

Section 5 Project Costs					
Please outline what you are seeking funding for					
e,g. equipment type, why needed and cost					
				£	
Please outline the contribution your organisation					
Is making towards the	£	(In Kir	ıd)	£	(Actual)
What is the amount you are applying for from the f	und				
(matched funding of 25% is required for all applica	ations)			£	
Section 6. Checklist					
Your Application can not be assessed unless you h	nave:-				
Answered all the questions			YES	3	NO
Included a copy of your current constitution and					
latest 12 months accounts			YES	3	NO
For junior section applications a copy of your Child	Protection	Policy	YE	S	NO
I confirm that any grant will be used solely for the punderstand that Leek & District Sports Council resorr part of a grant where the conditions of the grant subsequently discovered is false.	erves the ri	ght to wi	thho	old pa	yment of the whole
Signed					
Date					
Please forward you application to the Secretary of prior to the Meeting where you wish the grant to be			rts (Counc	il at least 7 days

January 2022