

DATA PROTECTION CONSENT FORM

Your privacy is important to us, but we would like to communicate with you to help us carry out our duties and let you know about our activities. To do this, we need your consent to hold and use your details. Please fill in your name, address and other contact information and confirm your consent by ticking the boxes below. If you are under 18, your parent or guardian should fill in their details as well, to confirm their consent.

Name:

Address:

Email:

Telephone:

Signature:

Date:

You can grant consent to any, or all of the purposes listed below as appropriate. You can withdraw or change your consent at any time by contacting the Clerk. You can find out more about how Plaistow and Ifold Parish Council uses your data on our website www.plaistowandifold.org.uk

Please as appropriate

We may contact you to keep you informed about what is going on in the Council's area, including news, events, meetings, clubs, groups and activities.

As a representative/official of a local group, we may use your details as supplied to us as a point of contact for that group

We may use your name and contact details in our newsletters, or on our website, or on our Facebook page

We may use your photograph in our newsletters, or on our website, or on our Facebook page

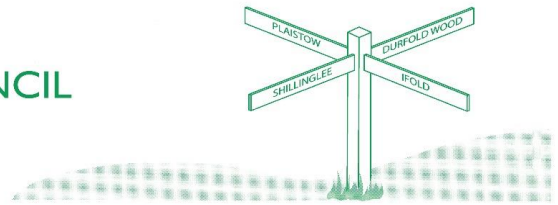
Other – please state:

Keeping in touch:

Yes please, I would like to receive communications by email

Yes please, I would like to receive communications by telephone

Yes please, I would like to receive communications by post



APPLICATION FOR GRANT

For financial year ending 31.03.2021

Please complete this form and return it to the Clerk no later than **6th January 2020.**

APPLICANT DETAILS

Organisation Name:

Contact Name:

Position in Organisation:

Organisation Address:

Contact Telephone No:

Contact Email Address:

Registered Charity:

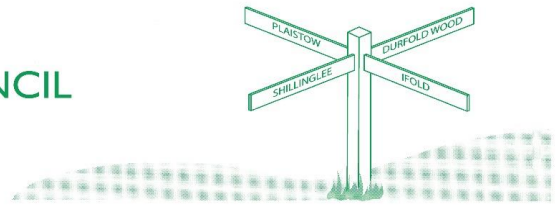
What are the main activities of your Group / Organisation?

Describe the project for which funding is required. Please include the projected timescale and the number of Plaistow and Ifold Parish Council residents who will benefit from the project:

Amount of grant requested:

[Where the amount requested is in excess of £500 kindly advise the reason for the stated amount]

What is the total cost of the project?



The current level of Reserves held:

What is the Applicant's policy for use of those Reserves?
[brief outline to be given]

Do you have funding from other authorities / organisations?

Have any fundraising activities been arranged by you?
[If yes, please provide brief details]

Any other relevant additional information to support your application?

I have read the terms and conditions and agree to them.
I enclose a copy of the most recent audited accounts and a current bank balance.

Signed:

Position in Group / Organisation:

Please confirm the account details where you would like the Grant payment to be made: -
Bank:
Sort Code:
Account Number: