

WELLS CITY COUNCIL

COMMUNITY GRANTS APPLICATION FORM

ORGANISATION	
Name of your organisation / group:	
What does your group / organisation do?	
CONTACT DETAILS	
Name of person applying:	
Address:	
Post code:	
Telephone:	
E-mail:	
Your position in the organisation: e.g. Chairman, Secretary, Leader	
AMOUNT	
How much are you applying for? (up to £500)	£
THE PROJECT	
What project is this grant for?	
How will this project benefit the community in Wells?	
When will the grant money be used?	
DATE OF APPLICATION:	