

# Small Grant Application Form<sup>1</sup>

### **CONTACT DETAILS**

Name of Organisation	Hindhead Athletic Football Club
Contact Name	Mark Babb
Position in Organisation	Chairman / Treasurer
Address	
Telephone	
Email	

## **PROJECT DETAILS**

Name of Project	Hindhead Playing Fields Pavilion Renovation
What aspect of the project will grant money be used for. Please be as specific as possible. <sup>2</sup>	Currently the stairs and balcony of the pavilion are in a poor state of repair, are rotten and need replacing. Whilst doing these works, we are also taking the opportunity to improve the layout of the pavilion to create a larger space in the bar area, and also a larger balcony area for the community to use. We have engaged with a local architect who has created designs for the project, which we feel will have a real benefit to the users of the site. We have enclosed designs of the proposed development.
What benefits for the Haslemere community do you expect will result from the project? <sup>3</sup>	Four sports clubs use the site, all of whom will benefit from these improvements. Beacon Hill Junior Football Club, who have around 350 junior players, Hindhead Cricket Club, with one senior team, Churt Cricket Club with one senior team, and Hindhead Athletic Football Club with 2 senior teams. The improvements will allow for increased usage for all clubs and will provide a great facility for members of the local village community to visit and watch some local sport, whilst supporting the member clubs. All clubs play in local leagues, and as such are visited by a high number of other clubs from the local area, who will also benefit from these improvements. The balcony also provides the only way into the pavilion, in which are located the ladies toilets, so without these improvements the flourishing girls section of Beacon Hill juniors may not be able to continue to grow.
Scheduled project start and finish date	Jan 2021-Apr 2021 (dependent on planning approval)

### **FUNDING DETAILS**

<sup>&</sup>lt;sup>1</sup> Delete as appropriate

<sup>&</sup>lt;sup>2</sup> Use a separate sheet if required <sup>3</sup> Use a separate sheet if required

Total estimated cost of the project	£25k-£30k
Amount of grant requested from the Town Council (should not be 100% of the total estimated cost of the project) <sup>4</sup>	£5k
Have you or will you be applying to other bodies for financial assistance?	Yes
If yes please state:	FA Community Foundation
To whom applied	
Amount(s) applied for	We anticipate that the Football Foundation will fund up to 75% of this project
Amount(s) received	TBC
Have you received a grant from the Town Council before? If so for how much and for what purpose?	N/A
What fundraising activities will your organisation be doing to fund this project?	We will ask members from all user clubs to donate to the project (around 400 members across the clubs). We will also ask existing life members and vice presidents for donations. We are also investigating other sources of funding.

## ORGANISATION DETAILS

Is your organisation a Registered charity or trust?  (If yes please provide Registration Number)	No
Is it affiliated to a National Body? If yes please specify.	Yes - Surrey Football Association
What are the aims and objectives of the organisation?	We aim to give adults within the Hindhead area the opportunity to play football in an enjoyable and friendly environment. We also aim to work with Beacon Hill Junior Football club to give older junior players the opportunity to take their first steps into senior football.
What is the geographical area covered by your organisation?	Hindhead
Bank account to which payment should be made	Account Name: To be confirmed if application is successful.
This must be in the name of your organisation.	Sort Code:
Payments cannot be made to individuals.	Account Number:

# VALIDITY CHECKLIST

For your project to be considered you must be able to confirm the following statements:

Criteria	Tick to confirm
The project is of benefit to residents of the Council's electoral area	
You hold a bank account in the name of the organisation applying, not an individual	

 $<sup>^{4}</sup>$  If this exceeds £1,000 remember to explain the exceptional circumstances for the Grants Committee to consider

This application is accompanied by either the latest audited financial report or, where this does not exist, a forecast budget of income and expenditure relating to the grant application.	<b>~</b>
The grant is not for a project already completed	<b>~</b>
The grant is not to contribute to a surplus for charitable distribution or to increase your organisation's reserves	
You consent to acknowledge HTC's contribution in your marketing / promotional material	<b>✓</b>

## **DECLARATION**

In submitting this application on behalf of the stated organisation I certify that all statements made or enclosed	Signed:
to be true.	
This application and all supporting information may be made publically available	
	Print name: MARK BABB
Date: 04 <sup>th</sup> December 2021	

### **NOTES FOR APPLICANTS**

#### Application procedure

Please note that no application can be considered unless delivered to the Town Clerk at Haslemere Town Council, Town Hall, High Street, Haslemere, Surrey, GU27 2HG at least **ten (10)** working days before the relevant Grant Committee or Council meeting.

No application will be considered by the Committee unless the applicant is able to confirm all of the Validity Checklist criteria. If in doubt contact the Town Clerk 01428 654305.

#### Consideration and notification

The application will be considered by the Grants Committee generally for capital expenditure only and on a matched funding basis.

The Committee meets every two [2] months. Successful applicants will be informed by letter/email as soon as possible thereafter.

#### Payment procedure

A grant payment will only be made by the Town Clerk against production of an original invoice or invoices for goods or services made out to the recipient organisation. Under no circumstances will payment be made to an individual.

Payments are made by cheque/BACS therefore the recipient organisation must hold a bank account in the name of the organisation.

Grants should normally be drawn down in one amount. The Grant Letter will state that the grant will automatically lapse if it is not claimed within the time specified.

As a courtesy, a reminder letter will be sent to the applicant organisation one [1] month before the expiry of the grant advising that the funds have not yet been claimed.

#### **Data Protection**

The information provided in this form will only be used by the Town Council in the administration of its Grants process and for no other reason. The information will be processed in accordance with the Council's data retention policy.