

Gislingham United Charity

Registered Charity No. 208340

Application for Funding

Please complete this form. You may use Panel 6 on page 2 for any additional information.

1.	Applic	ant Details
	Applic	ant Name
	Applic	ant Address
	• •	
	Teleph	nona·
	Mobile	
	Email:	
2.	+	describe the funding required. What is the item or service you need to fund?
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	DI	
3.	Please	provide a total sum of the item or service with a breakdown of any individual items.
4.	Supporting Information. Please provide copies of any quotes received, invoices or receipts available.	
5.	Have you considered or received support from other sources, e.g. Social Services? If so, please state	
J.	amount received.	
	GDPR	
	1.	Following a successful application for funding, the information provided on this form may be kept
	for the	e period required to enable GUC Trustees to comply with any legal obligations. You may request the
	deletio	on of this information at any time.
	2.	By signing this form, the Applicant consents to this process for the purposes of the General Data
	1	tion Regulation (GDPR) requirements.
c:		
Sign	ature:	
	Dotor	
	Date:	

6.	Use this Panel for Additional Information

On completion of the form, please submit it to the Clerk by either post or email:

- By Post to: 75 Shelfhanger Road, Diss, Norfolk, IP22 4EH
- By Email to: gislinghamunitedcharity@gmail.com