

Carsphairn Community Trust

Application Form 2022 - Extra-Curricular Grant Scheme

- By completing this application I am confirming that I have read and understood attached guidance sheet and enclose proof of full-time residency of eligible children (this box **MUST** be ticked). **Closing date: 13th May 2022**

Applicant Details (required):

Name:

Address

Postcode

Email Address:

Telephone Number:

Name of Children

Dates of Birth

Payment Details: for electronic payment:

Bank

Bank Sort Code:

Account Name:

Account Number:

- tick box if electronic payment preferred

OR Please pay me by cheque made payable to the applicant named above

- Please tick box if cheque payment method required

Privacy Policy:

Carsphairn Community Trust (CCT) require the above personal information in order to process your application and make payment. By making this application you are agreeing to CCT storing your data as described in the privacy policy.

CCT take your privacy seriously and will only use your personal information to process your application. We will not share your information with third parties unless we must do so under the terms of our funding, or are required to do so by law.

- I have read and agree to the Privacy Policy. Please tick box (available to view at <http://carsphairn.org/CCT>)

CCT will assist in completing applications or giving guidance where required. Phone 07710 124255

Check List – please tick all appropriate boxes and ensure all sections are completed

- | | |
|---|--|
| <input type="checkbox"/> Proof of <u>child's</u> full-time residency. | <input type="checkbox"/> Bank Details given and box ticked (or cheque payment ticked). |
| <input type="checkbox"/> Contact details provided | <input type="checkbox"/> Privacy policy ticked and understood. |
| <input type="checkbox"/> Proof of Child identity. (copies only) | <input type="checkbox"/> Application signed and dated |
| <input type="checkbox"/> School letter <u>or</u> | Please indicate how this grant will be spent: _____ |
| <input type="checkbox"/> Child allowance <u>or</u> | |
| <input type="checkbox"/> Child benefit | |

Signature of Applicant

Date

**PLEASE SEND COMPLETED FORMS BY 13th May 2022 TO:
CCT, c/o Eriff Farm, Carsphairn, Castle Douglas DG7 3TJ**

