



# HAMILTON SPORTS COUNCIL

## CLUB GRANTS SCHEME

### APPLICATION FORM

Name of Club: \_\_\_\_\_

Secretary's Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Fax No: \_\_\_\_\_

Telephone number (Home): \_\_\_\_\_ (Business): \_\_\_\_\_

Name of Sport: \_\_\_\_\_

Member of which Club: \_\_\_\_\_

Treasurer's Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Telephone number (Home): \_\_\_\_\_ Business: \_\_\_\_\_

Date on which Club was formed: \_\_\_\_\_

#### BREAKDOWN OF CLUB MEMBERSHIP:

Gents \_\_\_\_\_ Ladies \_\_\_\_\_ Boys U16 \_\_\_\_\_ Girls U16 \_\_\_\_\_

*Outline of project* – (Please give details of the project for which grant is being sought)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### DETAILS OF MEMBERSHIP FEES:

Gents \_\_\_\_\_ Ladies \_\_\_\_\_ Juniors \_\_\_\_\_

p  
l  
e  
a  
s  
e

d  
e  
t  
a  
c  
h

**SECTION 2 – FINANCIAL INFORMATION**

*Justification for Application - (How will a grant help to develop your club and sport within your area?):*

---

---

---

Amount of Grant Requested: £ \_\_\_\_\_

What financial contribution will your Club make towards the total cost? £ \_\_\_\_\_

*Details of fundraising your Club plans to undertake:*

---

---

How much did your Club earn from fundraising in the last year? £ \_\_\_\_\_

*Please give details of all other funding applied for or received by your organisation including application for support from any other Department within South Lanarkshire Council, South Lanarkshire Leisure or a lottery scheme, in respect of this Project*

---

---

Has your Club previously received support from South Lanarkshire Council, South Lanarkshire Leisure or from your District Sports Council during the last 24 months? YES / NO (Please delete accordingly)

*If Yes, please give details of amount, source and Project*

---

---

---

---

Bank Details (of all accounts held by your Club) :

**ACCOUNT 1**

Name of Bank: \_\_\_\_\_

Address of Bank: \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Account Number: \_\_\_\_\_

**ACCOUNT 2**

Name of Bank: \_\_\_\_\_

Address of Bank: \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Account Number: \_\_\_\_\_

Number of Accounts held by Club: \_\_\_\_\_

Is your club affiliated to their local Sports Council? YES / NO (Please delete accordingly)

**Please ensure that the following documentation is enclosed together with your Club's application. Failure to do so will result in your application being delayed.**

A copy of your Club's most recent Bank Statement(s)

A copy of your Club's last financial statement

A copy of the Club Constitution

Is your club affiliated to your Sports National Governing Body?

YES / NO (Please delete accordingly)

***Completed application form should be returned to:***

**Millar T Stoddart  
Community Recreation Manager  
South Lanarkshire Leisure Ltd  
1<sup>st</sup> Floor – North Stand  
Cadzow Avenue  
Hamilton  
ML3 0LX**

P  
l  
e  
a  
s  
e  
  
P  
l  
e  
a  
s  
e  
  
d  
e  
l  
e  
t  
a  
c  
h