



# HAMILTON SPORTS COUNCIL

## INDIVIDUAL SPORTS PERFORMERS GRANTS SCHEME

### APPLICATION FOR FINANCIAL SUPPORT

### DISCUSSION FORM

Name of Applicant: \_\_\_\_\_

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

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

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Telephone No: \_\_\_\_\_ (Home) \_\_\_\_\_ (Business)

E-Mail Address: \_\_\_\_\_ Fax No: \_\_\_\_\_

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

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

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*Please detail below your major sporting achievements in the above sport during the 12 months at International, National and West of Scotland level:*

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Date	Event	Venue	Position

Are you at present a member of a British or Scottish International Team YES / NO  
If YES, please give details of events.

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Have you participated in any Scottish Squad Coaching Days within the last twelve months? If YES, please give details of projects.

YES / NO

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Do you travel outwith South Lanarkshire for specialised coaching / training facilities? If YES, please give information.

YES / NO

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Name of your Coach: \_\_\_\_\_

<i>Please detail below the main events in which you have participated during the LAST twelve months</i>					
Date	Event	Travelling costs to championships and major events	Coaches fees (if any) in preparation for event	Accommodation: Hotel, Boarding House etc	Entry Fees

<i>Please detail below the main events during the NEXT twelve months</i>					
Date	Event	Travelling costs to championships and major events	Coaches fees (if any) in preparation for event	Accommodation: Hotel, Boarding House etc	Entry Fees

<i>Please give details of other outside funding received during the last twelve months, whether it be from sponsorship, National Governing Body of Sport, your Sports Club, the local Sports Council, International Sports Trust or the National Lottery.</i>		
Name of Agency	Date	Amount

Have you made recent application(s) to any other organisation for financial assistance? If YES, please give details:

YES / NO

Should you be successful in obtaining financial assistance, to whom should the cheque be made payable?

Cheque to be forwarded to (if not yourself): \_\_\_\_\_

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

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

Please give details of any other relevant information which may support your application:

Would you be prepared to assist the Area Sports Council and or South Lanarkshire Leisure in the promotion of your sport?

YES / NO

**DECLARATION:**

**I certify that, to the best of my knowledge, all information given on this form is correct.**

*Applicant's Signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_

*National Governing Body/  
Regional Squad  
Representative's Signature:*

\_\_\_\_\_ *Date:* \_\_\_\_\_

*Office Held:* \_\_\_\_\_

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

**Clare Winsch  
Secretary  
Hamilton Sports Council  
c/o South Lanarkshire Leisure Ltd  
1<sup>st</sup> Floor – North Stand  
Cadzow Avenue  
Hamilton  
ML3 0LX**