



STONEHOUSE TOWN COUNCIL

Support Stonehouse – Funding Application

Name of Organisation	
Name of Organisation Lead	
Email	
Telephone	

Service/s to be provided – please include details below

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When service/s to be provided:

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Where service/s to be provided:

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Amount needed – £

Please include breakdown of costs below

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Period Covered	
Bank Details	Account No: Sort Number:

Please confirm Organisation Lead is authorised to make the application: Yes / No

Signed _____ Date _____