



England Athletics – East Midlands

Regional Grant & Athlete Support Package

APPLICATION FORM

(Closing dates 01.09.07, 08.01.08 & 01.05.08)

Include as much information as possible to support the application. Please write clearly

Q7 When are you planning to:
a) start the project/activity?

Please remember we do not fund retrospectively and your project/activity must be completed within a twelve-month period.

b) complete the project activity?

Approval must be granted before the project start date.

Q8 Please indicate how your project will continue in future years without funding from England Athletics. (e.g. other sources of funding)

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Q9 Who will benefit from this grant?
Please indicate an estimated number in the box provided

Male U18 Male Adults Female U18 Female Adults

Ethnic Origin - Please tick

White <input type="checkbox"/>	Mixed <input type="checkbox"/>	Asian or Asian British <input type="checkbox"/>
White British <input type="checkbox"/>	White & Black Caribbean <input type="checkbox"/>	Indian <input type="checkbox"/>
White Irish <input type="checkbox"/>	White & Black African <input type="checkbox"/>	Pakistani <input type="checkbox"/>
White & Asian <input type="checkbox"/>	Bangladeshi <input type="checkbox"/>	Black or Black British <input type="checkbox"/>
Chinese or other ethnic Groups <input type="checkbox"/>	Black African – Caribbean <input type="checkbox"/>	Chinese <input type="checkbox"/>
African <input type="checkbox"/>		

Other please specify

People with Disabilities Yes No

Please specify

Q1 Name of Association/Club/Group: (in full, for cheque issuing purpose)

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Contact name:

Address:

.....

Post Code: E-mail address:

Phone Number: Day: Evening:

Position held: (Treasurer, Secretary, etc)

Q2 Are you working towards CLUBMARK accreditation? Yes No

If achieved please tell us when?

Q3 What projects/activities/support do you plan to use this grant for

(use additional sheets if appropriate)

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Please return this form to:
Chris Mallender, Regional Manager
England Athletics – East Midlands, Sports Development Centre
Loughborough University, Leicestershire LE11 3TU

Q4a For clubs only: Describe what currently exists within your club in reference to your application.

For example if you want to establish a new section/age groups, tell us what existing age groups are in place, levels of equipment, coach qualifications, current facility provision, etc...

Current age groups:

Days & times of training:

Facility:

Number of qualified coaches & levels:

List Equipment:

Q4b For Athlete Support Packages only: Please describe what support (coaching / sports science etc) you are already receiving from your club and or other coaches and how this support package would enhance what you are currently receiving. (use additional sheet if necessary)

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Q4c For all applicants - please detail any further relevant information in support of this application

(continue on a separate sheet if appropriate)

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Q5 Total cost must be given and you must also show in detail in question 6 how your group is contributing to the project. e.g.'in kind' contributions (volunteer time for example)

ITEM OR ACTIVITY	AMOUNT REQUESTED
Total amount of project/support package	
Less contribution (as detailed in answer to Q6 below)	
Total contribution	

Q6 You **WILL** be required to contribute up to 40% (50% for athlete support packages) of the total cost of the project, detail where the rest of the funding will come from - including any other grants received or applied for. This may include any 'in kind' contribution such as volunteer time or reduced facility hire costs i.e. if facility hire is already paid through existing activity (not applicable for athlete support packages)

SOURCE OF FUNDING	AMOUNT