



Total amount requested: ..... Date awarded (if applicable): .....

### **ORGANISATION DETAILS**

	Please write your responses below	Further guidance
What is the full <u>legal</u> name of your organisation?		
What name does your organisation use in its day-to- day work?		
When was the organisation established?		
Full address of organisation (inc. postcode)		
Website (if applicable)		
What type of organisation are you? Background information on		<ul> <li>For example:</li> <li>Unregistered voluntary or community organisation</li> <li>Not-for-profit company</li> <li>Registered charity (unincorporated)</li> <li>Charitable Incorporated Organisation (CIO or SCIO)</li> <li>Community Interest Company (CIC)</li> <li>Faith-based group</li> <li>School</li> <li>Statutory body</li> <li>College or University</li> </ul>
your organisation and its activities		
<b>Companies House Number</b> (if applicable)		
Registered Charity Number (if applicable)		
Are you a statutory body?		YES or NO If yes, please specify type

# ABOUT YOUR PROJECT

	Please write your responses below	Further guidance
Project name (that you are hoping to fund)		
Who will the beneficiaries of your project be?		For example: those in recovery from drugs and/or alcohol, women, men, those under 25
How does your project meet our funding priorities?		Please refer to our funding instructions closely. Our funding priorities for the next submissions window can be found in our most recent funding instructions. We will consider exceptional bids outside of this, but they must be aligned with our <u>charitable objectives</u> .
Project location		Must be in Lancashire and preferably either Lancaster or Morecambe - please provide full address including postcode
Amount requested		Up to £1,000 only
When would you like to receive the funding?		
When will the funding be spent by?		Must be within 12 months
What will you spend the money on?		

## CONTACT DETAILS

	Please write your responses below	Further guidance
Your full name		
Your role in the organisation		
Your email address		Please use a company email address if you have one
Your contact number		Please use a company telephone number if you have one
Can we contact you to		
discuss your application in more detail?		
What time of day is best for us to contact you?		

How did you hear about	
Walter Lyon Trust?	

#### **BANK DETAILS**

	Please write your responses below	Further guidance
The name of your organisation as it appears on your bank statement		
Name of your bank		
Account number		
Sort code		
Building society number		You only need to fill this in if your organisation's account is with a building society or a credit union.
		If your account is a credit union account, you should record your membership number in this field.

### DECLERATION

I have read and agree to the terms of the funding instructions	
I have been authorised by the governing body of my organisation to submit this application	
All the information provided is accurate and complete to the best of my knowledge	
I will notify Walter Lyon Trust of any changes to this application as soon as reasonably practicable	
If awarded funding, I agree to update Walter Lyon Trust on the outcome of my project. I will provide a photograph and	
a short summary to be used on the website.	

#### SIGNATURE

Full Name: ..... Date: ...

Date: .....

Position in Organisation: .....

Thank you for completing this form. Please double check the information contained and submit to <u>WLTrust@protonmail.com</u> with 'FUNDING SUBMISSION' and the name of your organisation written in the subject line. We will endeavor to respond to all submissions in line with the terms set out in our 2024/25 funding instruction.

We regret that not all submissions will be successful.