



# Ward Flexibility Funding Application Form

Thank you for your interest in Stockport Council's Ward Flexibility Fund. To give your group the best chance of success please read the guidance notes and the questions on the application form carefully.

Please ensure that all boxes on this form are completed. You must also include all additional information that is requested.

## 1. About Your Organisation

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### 1. Name of Organisation/ Group

Thornfield Bowling Club / Friends of Thornfield Crown Green Bowling

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### 2. Organisation/Individual Address

Thornfield Park  
Heaton Mersey  
Stockport

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### 3. Main Contact Details (for correspondence)

Title: Mrs

Name: Meg Cunningham

Role: Captain and Treasurer

Address:

Postcode:

Home Phone Number:

Mobile Phone Number:

Email Address:



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#### 4. Please provide your bank account details

Account Name:

Account Number:

Sort Code:

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#### 5. What is the status of your Organisation/ Group?

*Please Tick*

- |                                |                          |                                  |                                     |
|--------------------------------|--------------------------|----------------------------------|-------------------------------------|
| A New Group                    | <input type="checkbox"/> | Voluntary Organisation           | <input checked="" type="checkbox"/> |
| A Registered Charity No.       | <input type="checkbox"/> | Company Limited by Guarantee No. | <input type="checkbox"/>            |
| Applying for Charitable Status | <input type="checkbox"/> | Unregistered Association         | <input type="checkbox"/>            |
| Friendly Society               | <input type="checkbox"/> | Other (Please specify)           | <input type="checkbox"/>            |
| Housing Association            | <input type="checkbox"/> |                                  |                                     |

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#### 6. Please describe the main activities of your Organisation/ Group

Crown Green Bowling, Stockport Parks League, Stockport and District League  
Charity events eg. McMillan coffee days, local alzheimer support group.

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#### 7. When was your Organisation/Group established?

Pre 1:1:2000

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#### 8. Does your organisation have the following policies and procedures in place?

*If you are awarded a grant you will be required to send copies of all relevant documents as part of the grant agreement.*

- |  |                                     |
|--|-------------------------------------|
| A governance/management committee              | <input checked="" type="checkbox"/> |
| A Constitution/governing document/set of rules | <input checked="" type="checkbox"/> |
| An Equal Opportunities Policy                  | <input type="checkbox"/>            |
| A Child Protection Policy (where necessary)    | <input type="checkbox"/>            |
| A Health and Safety Public liability           | <input checked="" type="checkbox"/> |



## 2. About Your Application

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### 9. Please give us a brief description of your proposed/planned project or activity

*You may wish to include details of what activities will take place, where will it happen, how often and who will take part. If you are applying for equipment you can tell us what will it be used for and why is it needed.*

I am the captain of one of the Stockport ladies bowling teams based at Thornfield Park.

The bowling green is usually well used with several teams playing in various Stockport Leagues but obviously this last year and a half has been devastating and bowling has been severely curtailed due to Covid 19 restrictions.

We desperately want to get people back to bowling as it promotes both physical and mental wellbeing especially in our older age group of residents, many of whom were shielding for months at a time during the pandemic.

In order to resume league bowling next season we need a set of regulation jacks and our present jacks will be obsolete at the end of this year. As we have had so little bowling over the pandemic our funds are much depleted and we simply do not have the money to purchase the necessary jacks, hence this application for a grant to enable bowling to take place next season.

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### 10. Who will benefit from this grant?

*e.g. local residents, young people, older people and how?*

Mainly older residents of Stockport, particularly the Heatons who take part in or watch bowling, although younger people are always encouraged to take up bowling and a good number do.

#### 10(a) How Many Stockport residents will benefit?

The bowlers at Thornfield park in Heatons wards and visiting teams from other Stockport wards  
Approx 120

#### 10(b) Are there any restrictions on who will benefit from the funding?

No, bowling at Thornfield is always open to new players and anyone is welcome to watch the games

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### 11. Your Project's Budget

*Please provide a breakdown of cost for your project including VAT where applicable and submit any estimates for the purchase of equipment or work to be done.*

One set (6) bowling jacks at £48.50 each,

#### 11(a) How much will the project/activity cost in total?

£291

#### 11(b) Tell us about other any other sources of income you have already applied for or raised so far in relation to this project

none



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**12. How much are you applying for from the Ward Flexibility Budget?**

£291

**12(a) If the amount you are applying for covers only part of the project/activity, then please tell us how do you intend to fund any shortfall?**

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**13. What is the planned timescale for spending this grant?**

Start 01 August 2021

Finish Monday, 01 November 2021



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### 3. Which Wards are you Applying to?

You may tick more than one box. Please note that no grant of more than £1,000 in totality will ordinarily be made.

Please tell us for each ward you wish to make an application to:-

- (a) how many people will benefit in that ward; and  
(b) what proportion of funding from your overall application you are seeking from each ward.

		Number of beneficiaries	How much funding you are seeking
<b>Bramhall &amp; Cheadle Hulme South Area Committee</b>			
Bramhall North	<input type="checkbox"/>		£
Bramhall South & Woodford	<input type="checkbox"/>		£
Cheadle Hulme South	<input type="checkbox"/>		£
<b>Central Stockport Area Committee</b>			
Brinnington & Central	<input type="checkbox"/>		£
Davenport & Cale Green	<input type="checkbox"/>		£
Edgeley & Cheadle Heath	<input type="checkbox"/>		£
Manor	<input type="checkbox"/>		£
<b>Cheadle Area Committee</b>			
Cheadle & Gatley	<input type="checkbox"/>		£
Cheadle Hulme North	<input type="checkbox"/>		£
Heald Green	<input type="checkbox"/>		£
<b>Heatons &amp; Reddish Area Committee</b>			
Heatons North	<input checked="" type="checkbox"/>	50	£145.5
Heatons South	<input checked="" type="checkbox"/>	50	£145.5
Reddish North	<input type="checkbox"/>		£
Reddish South	<input type="checkbox"/>		£
<b>Marple Area Committee</b>			
Marple North	<input type="checkbox"/>		£
Marple South	<input type="checkbox"/>		£
<b>Stepping Hill Area Committee</b>			
Hazel Grove	<input type="checkbox"/>		£
Offerton	<input type="checkbox"/>		£
Stepping Hill	<input type="checkbox"/>		£
<b>Werneth Area Committee</b>			
Bredbury & Woodley	<input type="checkbox"/>		£
Bredbury Green & Romiley	<input type="checkbox"/>		£
<b>Totals</b>		<b>100+</b>	<b>£291</b>

This total should add up to  
the figure you provided in  
**Question 12**



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## 4. Application Checklist and Declaration

1. I am authorised to make this application on behalf of the above organisation ☒
2. I certify that the information contained in this application is correct ☒
3. If the information changes in any way I will inform Democratic Services accordingly. ☒
4. I give permission for Democratic Services to contact my organisation and/or myself by phone, mail or e-mail with information about its activities and funding opportunities. ☒
5. I/ we agree (if required) to attend an Area Committee meeting to explain how the proposal will improve the environmental, economic or social wellbeing of the area and to answer any questions. ☒
6. Our details can be used for promotional purposes should this request be successful ☒
7. I/We will use this grant for the proposed project/activities stated in our application. ☒
8. I/we will not use the grant for any other purpose prior to contacting Democratic Services in order to seek authorisation. ☒
9. I/we will provide appropriate proof of expenditure to Democratic Services, within 12 months from the Grant being made. ☒
10. I/we will highlight the support of the Area Committee in recent publicity material. ☒
11. I/we agree to providing information to assist in the future monitoring of the effectiveness of the funding including reporting back to the Area Committee on how the grant has been spent and what difference it has made. ☒
12. I/we agree that the content of this completed application form and any supplementary information provided may be published on the Council's website and other publications as part of the application process. ☒

Print your name: M J Cunningham

Signature: .....

**or** if submitted electronically tick this box to signify your agreement to the above terms ☒

Date: 23/7/21



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