

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

1. Name of Organisation/ Group

CHEADLE SPORTS - BOWLS SECTION

2. Organisation/Individual Address

CHEADLE (KINGSWAY) SPORTS CLUB 225 KINGSWAY GATLEY, CHEADLE SK8 ILA.

3. Main Contact Details (for correspondence)

MR Title:

Name: NORMAN WALKER

Role: LIFE MEMBER / COMMITTEE MEMBER.

Address:

| 4. Please provide your bank account detail | İs |
|--|---|
| Account Name: | |
| Account Number: | |
| Sort Code: | |
| 5. What is the status of your Organisation/ Please Tick | Group? |
| A New Group | Voluntary Organisation |
| A Registered Charity No. | Company Limited by Guarantee No. |
| Applying for Charitable Status | Unregistered Association |
| Friendly Society | Other (Please specify) |
| Housing Association | CORMUNITY AMATEUR SPORTS CLUB (CASC) |
| 6. Please describe the main activities of your PLANING OF CROWN GREEN | DOWLS |
| AND RELATED SOCIAL 4 | CTIVITIES. |
| 7. When was your Organisation/Group est ORIGINALLY CHEADLE BONLS SECTION PR | CRICKET CLUID : OVEI |
| 8. Does your organisation have the follow If you are awarded a grant you will be require of the grant agreement. | ing policies and procedures in place? ed to send copies of all relevant documents as part |
| A governance/management committee | |
| A Constitution/governing document/set of rule | es 🔽 |
| An Equal Opportunities Policy | Image: Control of the |
| A Child Protection Policy (where necessary) | |
| A Health and Safety Public liability | |

2. About Your Application

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 FOLLOWING A RECENTRENT DRIVE WE NEED S'IDES FOR A and why is it needed.

GAZEBO AND FUNDING FOR ADDITIONAL BOWLS -MAINLY LASIES

10. Who will benefit from this grant?

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

LOCAL RESIDENTS (MENBERS) CHPPENTLY MANLY OLDER PEOPLE BUT NOT RESTRICTED TO OLDER PEOPLE.

10(a) How Many Stockport residents will benefit?

64 AT PRESENT BUT RECRUITMENT ENGOING.

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

NO.

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.

ADDITIONAL SIDES FOR GAZEBO - £189.

8 400 TIGHTL SETS OF BOWLS APPROX - \$ 800-

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

£ 989 (£800 for bowls is a maximum subject to sizes/weights of bowls which cannot be determined yet.).

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

GAZEBR FRAME LROOF FUNDED BY MEMBERS,

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

£ 989.

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?

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

JULY / ARGUST 2021 Finish SEPTEMBER 2021



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. | e1 & | | Number of beneficiaries | fund | much ing you seeking |
|---|----------------|----------|-------------------------|-------|----------------------------|
| Bramhall & Cheadle Hulme South Area Con | nmittee | _ | | c | |
| Bramhall North | | | V *** | £ | |
| Bramhall South & Woodford | | | ₹ | . £ | |
| Cheadle Hulme South | | | 100 | . E . | |
| Central Stockport Area Committee | | | = 1/2 | £ | |
| Brinnington & Central | | | # 5 ₀ . | £ | |
| Davenport & Cale Green | | | | | |
| Edgeley & Cheadle Heath | | | | £ | .8 |
| Manor | | | | £ | 55 |
| Cheadle Area Committee | | | 7 | | |
| Cheadle & Gatley | | U | 6 610 | 2 | 989 |
| Cheadle Hulme North | | 4 | 107 | £ (| 707 |
| Heald Green | | <u> </u> | J | E.J | |
| Heatons & Reddish Area Committee | | | | £ | |
| Heatons North | | | | | |
| Heatons South | ,* | | | £ | |
| Reddish North | | | 25 60 . | £ | |
| Reddish South | | | 101 | £ | |
| Marple Area Committee | | - | \$1 900 · | • | |
| Marple North | | | | £ | |
| Marple South | 5 | | | £ | ¥. |
| Stepping Hill Area Committee | | | | £ | |
| Hazel Grove | 67 | | | £ | |
| Offerton \ | | | | | |
| Stepping Hill | | | | £ | |
| Werneth Area Committee | | _ | | £ | |
| Bredbury & Woodley | | | | £ | |
| Bredbury Green & Romiley | | | | | 000 |
| | Totals | | 64 | £ | 989 |
| × | This total sho | ould a | dd up to | -4 | 2. |

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



Return to: Democratic Services Town Hall, Stockport SK1 3XE

4. Application Checklist and Declaration

| 1. | I am authorised to make this application on behalf of the above organisation | 回 |
|--------------|--|---|
| 2. | I certify that the information contained in this application is correct | Y |
| 3 . | If the information changes in any way I will inform Democratic Services accordingly. | V |
| 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. | V |
| 6. | Our details can be used for promotional purposes should this request be successful | Y |
| 7. | I/We will use this grant for the proposed project/activities stated in our application. | V |
| 8. | I/we will not use the grant for any other purpose prior to contacting Democratic Services in order to seek authorisation. | Image: Control of the |
| 9. | I/we will provide appropriate proof of expenditure to Democratic Services, within 12 months from the Grant being made. | V |
| 10. | I/we will highlight the support of the Area Committee in recent publicity material. | 四 |
| 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. | V |
| 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. | Y |
| Print | your name: NORMAN H. WALKER | |
| - | ature: | |
| <u>or</u> if | submitted electronically tick this box to signify your agreement to the above terms |] |
| Date | H JULY 2021 | |