

# Request for Funding for Group/School/Club



Name

Amount to fund

Date required for funding

Recipient details

Address:

Postcode:

Do you have liability insurance?

Yes

No

Email Address

Contact Number

Details of project funds

Total  
cost of  
project

Bank Details: Account No:

Sort Code:

Fund Manager Signature

Date

Print Name

Detailed description of request for funding

Please return to: [hello@angeltrust.co.uk](mailto:hello@angeltrust.co.uk) or post to Belvedere House, Kingsway, Bishop Auckland, DL14 7JN

Notice to all applicants Please note Angel Trust do not provide funding retrospectively

<b>Finance Use Only:</b>	<b>Board Meeting:</b>
Fund Name	.....
Date Form Received	.....