

IN CONFIDENCE

E F BULMER BENEVOLENT FUND GRANT APPLICATION FORM FOR INDIVIDUALS

About Your Organisation

Organisation Name:

Address:

Name of Contact in Organisation:

Position:

E-Mail:

Telephone Number (Land Line):

Mobile:

About the Individual

Name:

Address:

Individual's Financial and Social Circumstances (ie why (s)he or family cannot pay). Please comment on the following, and any other relevant, aspects: employment/employment seeking/prospects, savings, (extended) family's ability to contribute:

Item(s) Required:

Reason Required:

Full Cost: £

Amount Applied for from E F Bulmer Benevolent Fund: £

Where else are you hoping to get, or have you got, funding for this?

Supplier:

Payment is by electronic banking. Please provide the following information:

- Name of Organisation:
- Sort Code:
- Bank Account Number:
- Reference (very important if paying a large organisation or supplier):

Payment must be to your organisation or the supplier of the goods. Payment will not be made to the individual beneficiary direct.

Name/Signature

Date

Please return this form by Email to efbulmer@gmail.com

James Greenfield, Administrator, E F Bulmer Benevolent Fund, Fred Bulmer Centre, Wall Street, Hereford HR4 9HP

Form Updated February 2018

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