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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SPORTS GRANT APPLICANT DETAILS FOR AFFILIATED PLAYER/CLUB/OFFICIALS/OTHER** | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| **Grant Category** | **Player** |  | | **Umpire** |  | **Coach** | |  | **Club** |  | **Other** |  | |
| **Main Contact** |  | | | | | **Contact Tel. No.** | | | |  | | | |
| **EN Personal ID** |  | | | | | **EN Club ID** | | | |  | | | |
| **Forename** |  | | | | | **Surname** | | | |  | | | |
| **Address 1** |  | | | | | | | | | | | | |
| **Address 2** |  | | | | | | **Postcode** | | |  | | | |
| **Email** | **@** | | | | | | | | | | | | |
| **Telephone** | **Home** | |  | | | | **Mobile** | | |  | | | |
| **I confirm that I have read and agree to the terms and conditions for the CNL Sports Grant Scheme in relation to this request** | | | | | | | | | | **Please tick box**  **as acceptance** | | |  |
| **DETAILS OF APPLICATION** | | | | | | | | | | | | | | |
| **TOTAL COSTS INVOLVED: £** | | | | | | | | | | | | | |

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| --- | --- | --- | --- | --- | --- |
| **OFFICIAL USE ONLY** | | | | | |
| **Date Received** | **\_ \_ / \_ \_ / \_ \_** | **Committee Decision** | | **Approved / Rejected** |
| **If approved, value** | **£** | **Payee details** |  | |
| **A/c No.** |  | **Sort Code** | * **-** | |
| **Online Payment Made** |  | | | | |

Return completed from to: CNL Treasurer -  ***netball.jmm@gmail.com or post to address below***

**(Please print or photocopy this application form if necessary)**