

TAUNTON AID IN SICKNESS FUND

Registered Charity No. 260716

APPLICATION FOR AID



Apply to: The Clerk
c/o Stafford House
Blackbrook Park Avenue
Taunton
Somerset TA1 2PX

Email: info@tauntonaidinsicknessfund.co.uk

Applicants Details

Applicant's Name:

Age:

Address:

Postcode (In order to be considered for a grant all applicants must live within a five mile radius of St Mary Magdalene Church, Church Square, Taunton TA1 1SA):

Occupation:

Marital Status:

Ages of other household members:

Nature of Illness or Disability:

Doctors Details

Doctor's Name:

Telephone No.

Address:

Postcode:

Aid Required

What aid is required and why?

Total amount required from fund: £

Please list and cost items individually, and ensure value for money

For high cost items such as flooring, 3 different quotes are required

We are a small local charity hoping to support needs not met by statutory/public funds.

If the grant requested exceeds £500, which other charities/funds have been approached?

If the application relates to a child of 17 or younger, when was the Family Fund Trust last approached, and what was the outcome?

Referring Agency Details

Name of Referring Agency:

Telephone No.

Address:

Postcode:

Email address:

Payee Information

Who should the cheque be made payable to?

(Grant cheques will only be made payable to referring agencies and never direct to applicants or third parties.)

Applicants Supporting Information

Background information to support application

(Please list all benefits/income currently received or with award decisions pending)

PIP

DLA

AA (Attendance Allowance)

Signatures and Consent

Signature of person making application (This must be the person who is responsible for submitting and monitoring the use of any grant awarded.)

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Please print name in block capitals:

Position held at Agency:

Date:

Consent of Applicant

I hereby give my consent to this application being made on my behalf and confirm the accuracy of the information supplied. I consent to the Taunton Aid in Sickness Fund

processing my personal data in accordance with the terms of the charity's Privacy Notice for the purposes of considering this application for financial aid. The charity's Privacy Notice is available on the website at: www.tauntonaidinsicknessfund.co.uk

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Signature of Applicant

Date:

Applications on behalf of children under the age of 16:

Please note that if the application is being made on behalf of a child under the age of 16, the above consent statement should be signed by someone holding parental responsibility for the child.