**The Malvern Farmers Veterinary Club Charitable Trust Application Form**

**Contact Details**

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| --- | --- |
| Name of charity or community group |  |
| Your name |  |
| Your role within charity or community group |  |
| Email |  |
| Phone |  |
| Mobile |  |
| Postal address |  |

**Funding Application Details**

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| Please provide an overview of the project a grant would be used for. |  |
| How does the proposed use of the grant benefit the rural community within the Trust boundaries? |  |
| Detail your eligibility |  |
| Total Cost of the project  |  |
| The contribution, if any, by applicant or other organisations |  |
| Have you ever received a grant from Malvern Farmer Vetinary Club Charitable trust? |  |
| If so, what did you use the grant for? |  |
| How would you tell your community about funds you receive from us? |  |
| What else would you like us to know/consider when we assess your application? |  |
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