**Margaret Williamson Memorial Fund**

**Grant Application Form 2024**

This fund was set up in 2016 and helps to keep alive the memory of Margaret Williamson, Congleton’s “First Lady”, who died in 2015. Margaret was a driving force and inspiration to improve Congleton and the aim of the Fund is to keep that spirit going.

The Fund will support ideas and projects which improve the cultural environment in Congleton and District. These were things that Margaret was passionate about.

The Fund will give priority to ideas and projects based in Congleton and District which meet one or more of the following criteria:

* Provide opportunities for people to take part in musical, theatrical, literary, performing art, dance, or other artistic activities.
* Provide opportunities for education and awareness of the natural environment, especially among young people.
* Conserve or improve the natural environment for the benefit of the people in Congleton and District.

The information on this form will help us to process your grant application. If there is anything you do not understand, please contact Cathy Dean at 01260 270350 etx 7.

*The MWMF is held as an endowment fund by Cheshire Community Foundation (Charity Registration: 1143711) and administered by Congleton Partnership.*

**Please complete all sections of this application form by 18th March 2024**

Contact Details

|  |  |
| --- | --- |
| Name of organisation/ group: | *Group* |
| Address: | *Address* |
| Postcode: | *Postcode* |

The contact person should be someone from your organisation who can discuss the application. Please give an alternative person in case the first contact person is unavailable.

|  |  |  |
| --- | --- | --- |
|  | First Contact | Second Contact |
| **Name:** | *Name* | *Name* |
| **Position:** | *Position* | *Position* |
| **Daytime phone no:** | *Daytime* | *Daytime* |
| **Evening phone no:** | *Evening* | *Evening* |
| **Email:** | *Email* | *Email* |

About your organisation

**What type of organisation are you? Please mark all boxes that apply:**

* Unregistered community group/ club/ society: [ ]
* Registered charity [ ]

Charity Number if applicable: *Insert charity number here*

* Other type: *Please state here*
* Do you have a constitution or a set of rules? Yes [ ]  No [ ]

**What does your organisation or group do?**

*Click here to enter text.*

**What is your organisation’s annual income and expenditure?**

PLEASE ENCLOSE A COPY OF THE ORGANISATION'S LATEST STATEMENT OF ACCOUNTS.

Please state here which financial year the figures below relate to: *Insert year(s)*

* Income £ *Insert amount*
* Expenditure £ *Insert amount*
* Reserves/ Surplus £ *Insert amount*

Details of Grant Requested

**What is the need for your project?**

Describe the opportunities this project offers or the difficulties it aims to tackle.

*Click here to enter text.*

**What do you want to do?**

What activity would the grant pay for?

*Click here to enter text.*

**How will the project improve the cultural or natural environment in Congleton & District?**

Describe what changes or improvements you expect to see as a result of your work

*Click here to enter text.*

Your Budget

**How much will the project cost in total?** £*Insert amount*

As well as the MWMF grant, please tell us where the other funds for this project will come from. Please mark secured funds with an **S**. If you have applied elsewhere for funding, please tell us where and indicate when you will know the outcome of these applications.

|  |  |  |
| --- | --- | --- |
| Grant | Amount (£) | Secured (S) or Outcome Date |
| *Name of organisation* | *£* | *Secured or date* |
| *Name of organisation* | *£* | *Secured or date* |
| *Name of organisation* | *£* | *Secured or date* |

**What will the MWMF Grant be used to pay for?**

|  |  |  |
| --- | --- | --- |
| Item | Total Cost (£) | Amount you are asking MWMF to pay for (£) |
| *Add item* | *£* | *£* |
| *Add item* | *£* | *£* |
| *Add item* | *£* | *£* |
| *Add item* | *£* | *£* |
| **Grand totals:** | **£** | **£** |

**If a grant is made, please provide the payee details below:**

Account name:*Insert name here*

Bank:

Account No:

Sort code:

If by Cheque Payee Name:

Signed:Date:Click here to enter a date.

**Send your completed application to:**

Margaret Williamson Memorial Fund

Congleton Town Hall

High Street, Congleton, CW12 1BN

**Tel:** 01260 270350 ext 7

**Email:** info@congleton-tc.gov.uk