

United Kingdom Women's Club of Trinidad & Tobago 46A Mucurapo Road St James Port of Spain

Patron: Sherronie Hollingsworth

APPLICATION FORM FOR AN ORGANISATION TO OBTAIN ASSISTANCE FROM THE UK WOMEN'S CLUB

(Application to be received by November 30th. Funds distributed the following March)
NAME OF ORGANISATION:
ADDRESS:
TELEPHONE NO:EMAIL ADDRESS:
CONTACT PERSON / POSITION HELD:
HOW IS YOUR ORGANISATION FUNDED?
WHAT IS THE PURPOSE OF YOUR ORGANISATION?
HOW LONG HAS THE ORGANISATION BEEN OPERATING?
WHAT IS YOUR REQUEST?
NAME / ORGANISATION TO WHOM CHEQUES ARE TO BE MADE PAYABLE:
Attach any receipts or invoices to support this application.
NAME:
SIGNATURE:
DATE: