

REF:

Variety Club Children's Charity

Application for Grant for Individual Child

Before completing the form please read the guidelines.
Failure to complete this form fully will result in us having to return it to you for more information.

Please return to: Variety Club Children's Charity, Variety Club House, 93 Bayham Street, London, NW1 OAG

1.

Name of Child _____ Date of Birth _____

Address: _____

Parents/guardian's names: _____

Parent/Guardians Day time telephone no: _____

Name of Applicant: _____

Please specify relationship to child: _____

(eg. Parent, teacher, occupational therapist, physiotherapist etc.)

If you are a charity applying on behalf of a child please give brief details on work done by the charity and enclose your latest Annual Report and Accounts.

Address for correspondence: _____

Day time telephone no: _____

2.

Give details of any previous application made to Variety Club Children's Charity on behalf of the child:-

Year	Amount Received	Purpose for which grant was requested	Tick if was refused
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3.

a) Please give information on the child and family background including parent's occupations, other children in the family etc:

b) Please also give details of the nature of disability (if appropriate) and how this affects the child:

c) We require a detailed break of the family's financial situation, i.e. incomings, outgoings, information on mortgage or rent payments, other bills etc. Continue on a separate sheet if necessary:

Income (Monthly)	£	Expenditure (Monthly)	£
Parents take home Wages		Rent/Mortgage	
Child Benefits		Council Tax	
Disability Living Allowance		Water/Electricity/Gas	
Other Benefits		Insurances	
Any Other Income		Car expenses (Petrol, Tax and Insurance)	
		Child Care	
		Household expenses, ie food	
		Telephone and Television	
		Any other Expenditure	
Total Monthly Income		Total Monthly Expenditure	
Savings		Debts/ Arrears	
Comments:			

4.

IT IS NECESSARY IN THE CASE OF EQUIPMENT FOR A WRITTEN RECOMMENDATION TO BE PROVIDED FROM A PROFESSIONAL APPROPRIATELY QUALIFIED PERSON. IT IS ALSO IMPORTANT FOR YOU TO PROVIDE A WRITTEN QUOTE FOR THE EQUIPMENT.

Do we have your permission to contact the person supporting your application? YES/NO

Please give details on the items required, and how this will benefit the child:

5.

a) Give a breakdown of total equipment costs*.

***Quotations should be inclusive of VAT unless the item is designed specifically for the use of disabled children**

b) How much has been raised from:

Family £ _____

Local Authority £ _____

Local Fundraising £ _____

Other Sources £ _____

c) Grant requested from Variety Club £ _____

We may approach you for further information if we need it? Yes/No* *Delete as appropriate

If Variety Club is able to assist, if requested would you agree to publicity? Yes/No*

Signature of Applicant _____ Print Name _____

Date _____

CHECK LIST

Please remember to enclose the following:

Fully completed and signed Application Form

Official Quote(s).

Quotes must be supplied with every application. Application forms received without written quotations will not be considered by the Appeals Committee.

A supporting letter.

A supporting letter from an Occupational Therapist, Doctor and/or any other member of the medical professional is acceptable. Letters written by parents, guardians, social workers will not be considered.

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If you agree to receive communications from the Variety Club Children's Charity and Variety Club Events Ltd please tick the box