

The Roger David Burrows Music Fund

Grant Application Form, closing date 1st January 2023 - Individuals

A) Personal details	
Full name	
Address	
Post cod	e
Telephone number Email	
Age (if under 18)	
If under 18: - Full name of Parent, Guardian or Responsible Adult	
Relationship to applicant	
Address (if different from above)	
Post cod	e
Telephone number Email	
B) Information about what you are seeking a grant for	
What is the grant to be used for?	
What is the full cost?	
How much are you asking for?	
What other funding have you for the above?	
How will this meet the aims of The Roger David Burrows Music Fund?	

How did you know about this F	und?	
C) Independent Referee Please provide details of an ind	ependent referee, please see the guidelii	nes.
Title Forename	Surname	
In what capacity does this perso	on know you?	
Address		
	Post code	
Telephone number	Email	
If successful the Trustees would	d like to receive feedback from you later a	as to how the grant has helped you.
If successful the grant will be pa	aid by a cheque, please state who it shou	ld be payable to: -
The Trustees decision is final ar	nd no correspondence will be entered int	0.
Burrows Music Fund and for an will not be shared with any othe clarification may be required fregulation. By completing and signing this a	otice will only be used to assess your application by related correspondence; it will be held er organisations or individuals except wh om your nominated referee or we are recomplication form you are providing your of application form you are providing your of and hold your personal data in accordance	electronically and as a hard copy. It ere supporting information or quired to do so by law or consent for The Roger David
D) Declaration When you have completed the	e application, please sign this declaration:	-
I confirm that the information I	have given in this application form is cor	rect.
If I am awarded a grant from The purposes described in the appli	ne Roger David Burrows Music Fund, it wi ication.	ll be used exclusively for the
Name	Signature	Date
If under 18 years old:		
Name of Parent, Guardian or Re	esponsible Adult	
Their Signature	Date	

Please provide any other information on how this will help you and to help the trustees to decide on your

application.

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