



For Office Use Only	
Date application received	
Decision	
Minute Ref	
Amount of grant	
Date grant Paid	
Cost Code	

Radyr & Morganstown Community Council Cyngor Cymuned Radur a Threforgan

The Old Church Rooms
Park Road
Radyr
Cardiff CF15 8DF

Grant Application Form 2023/24

Thank you for your enquiry about applying for a grant.

Please complete & return this application form with all supporting documentation to:

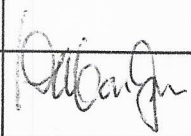
Clerk to the Council
Radyr & Morganstown Community Council,
Old Church Rooms, Radyr, Cardiff CF15 8DF.

Alternatively, you can submit the form via e-mail to clerk@radyr.wales

If you would like assistance in completing this form or have any questions about it, please contact the Council on 02920 842213/07463238534

1. Name of organisation	Radyr Friends of Alzheimers Society		
2. Contact Address			
3. Telephone number/ contact number			
4. Meeting Place or Venue (where your activities take place)	OCR for meetings		
5. Website (if any)			
6. Status of organisation	Charity	Other	Charity/Company number

7. Date your organisation was established. (The Council would wish to be assured that any organisation we support is sustainable.)	2018 Committee of 7 local residents. R&MA Charity in 2018 and 2024		
8. Contact Name	David Cargill		
9. Position (within organisation)	Hon Treasurer		
10. What are the aims and objectives of your organisation	Funds raising group on behalf of the Alzheimers Society		
11. Purpose for which the grant is sought	To sponsor and help support the success of a choir concert in Christ church in January 2024		
12. How have you identified the need for this project	This is part of the annual fund raising programme of the group		
13. Amount Requested	£250		
14. For amounts over £500 please attach your last audited accounts.			
15. How will the project improve the quality of life for people who live in, work, or visit Radyr & Morganstown.	Past concerts have been well attended and a significant amount of money has been raised for the Society. Of all the groups in the village this is amongst the most successful and popular.		
16. What are the consequences of <i>not</i> undertaking this project?	There are a number of costs associated with this event which have to be met prior to the selling of tickets to the local community		
17. When will the project/activity start and finish?	The arrangements have commenced with the venue. Choir and soloists.		
18. Who will benefit from the grant? (tick those which apply) Adults Older Adults Children (up to 11) Young people (12-12) Men Women The whole community	The Alzheimers Society (locally and nationally) This disease affects all members of society irrespective of age.		
19. How many beneficiaries of the project/activity live or work in Radyr & Morganstown? How have you come to this conclusion?	There are a number of residents in the community suffering from this disease and assistance towards its cure can only benefit all		
20. Please explain how your project will reflect the social and cultural make-up of our community.	This community is a great supported of charity work and it is recognised as a part of community life in the village.		
21. Please provide a full budget for the project,	Item	Total Cost	Amount Requested
	Christ church	£100	

including how much you wish the Council to contribute.	Choir & Soloists	£350	£250	
	Administration costs - printing	£75		
Total				
22. How will you raise any outstanding balance?				
23. Have you made an application to other funders for this project/activity? Or do you intend to? If so please tell us who they are, how much you have requested and when you expect a response.	Funder	Amount Requested	Amount Awarded	Response Date
	no			
24. How will you know if the project has been successful?	On conclusion of the event			
25. In the event that your application is successful please provide details of the bank account to which payment should be made:	Sort Code	Account Number		
26. Your Committee	Chair	Treasurer	Secretary	
	Mark Richards	David Cargill	Gaynor Leaf	
27. I confirm that the information contained within this form is correct and that I have attached the required documents	Name	Position	Signature	Date
	D A Cargill	Treasurer		13.10.23

Please return the completed application form and supporting documents to:

**Radyr & Morganstown Community Council,
Old Church Rooms, Park Road, Radyr, Cardiff CF15 8DF**

R&MCC Clerk – 02920 842213
Email: clerk@radyr.wales

Where applicable, please include the following documents..

Please tick:

- x Fully completed application form
- Evidence of cost (quotations)
- Audited accounts: for applications over £500.00
- Copy of your organisation's Governing Documents (Constitution, Terms of Reference)
- Equal Opportunities Policy.
- Safeguarding policy (if working with vulnerable adults)
- Child Protection Policy (if working with children/ young people)

If the Council award a grant, you will be required to include our logo on any promotional material etc and indicate that the Council has supported the activity.

Applicants are also encouraged to produce any associated publicity material bilingually (Welsh and English.)

You may also be required to complete a monitoring form to indicate how the money has been spent.

Details of how the Council use your information can be viewed at our [website](#).