

YOUTH GROUP APPLICATION FOR FINANCIAL ASSISTANCE

NAME OF ORGANISATION: Wrexham A.B.C.

1. NAME AND ADDRESS FOR CORRESPONDENCE: STEPHEN WILLIAMS 36 CEARLOR ROAD LLOXMA LL13 9HY

2. REASON FOR APPLYING FOR YOUTH GROUP SUPPORT? NEW ROOF AND NEW EQUIPMENT

3. PLEASE TELL US ABOUT YOUR PROJECT/EVENT. IS IT SHORT OR LONG TERM? LONG TERM. HOW ARE YOU FUNDED? SUBS PAID BY LEARNERS. WOULD YOU BE PREPARED TO GIVE A PRESENTATION TO THE YOUTH COMMITTEE ABOUT YOUR GROUP/ORGANISATION AND YOUR FUNDING REQUIREMENTS? YES/NO

4. TELL US ABOUT YOUR ORGANISATION. WHAT DOES IT DO? AMATEUR BOXING.

iii) WHERE ARE YOU BASED? WESTMINSTER DRIVD. iv) WHEN AND HOW OFTEN DO YOU MEET? 5 DAYS A WEEK.

v) HOW LONG HAVE YOU BEEN ESTABLISHED? 1985

5. HOW MANY YOUNG PEOPLE DO YOU HELP FROM THE ACTON COMMUNITY COUNCIL AREA? 30 A WEEK.

6. WHAT IS THE AGE RANGE OF THESE YOUNG PEOPLE: UNDER 5 YEARS 0 5 - 15 YEARS 20-30 16 - 25 YEARS 20-30

7. IS YOUR ORGANISATION A REGISTERED CHARITY? YES/NO. IF YES PLEASE GIVE THE REGISTERED CHARITY NO.: W.A.B.A.

8. IS YOUR ORGANISATION PART OF A LARGER ORGANISATION AND IF SO WHICH ONE? YES WELSH BOXING.

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7. IS YOUR ORGANISATION A REGISTERED CHARITY?
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 YES NO

6. WHAT IS THE AGE RANGE OF THESE YOUNG PEOPLE:
UNDER 5 YEARS 5 - 15 YEARS 16 - 25 YEARS 20 - 30

DO YOU HELP FROM THE ACTON COMMUNITY COUNCIL AREA?
30 A WEEK

YOUTH GROUP GRANT APPLICATION FROM:

9. TELL US ABOUT THE SIZE OF YOUR ORGANISATION:

i) HOW MANY STAFF DO YOU EMPLOY? 4

ii) HOW MANY VOLUNTEERS DO YOU HAVE? 4

!!!ARE THEY QUALIFIED & HAVE THEY RECEIVED APPROPRIATE TRAINING AND, IF APPROPRIATE THE NECESSARY SECURITY CHECKS? C.R.B. CHECKED

10. IS THE WORK OF YOUR ORGANISATION SUPERVISED BY AN OFFICAL BODY? YES/NO

IF YES, PLEASE STATE SUPERVISING BODY: W.A.B.A.

11. PLEASE SUPPLY COPIES OF YOUR ACCOUNTS FOR THE LAST TWO YEARS [ENCLOSED? YES/NO]

(e.g.: AUDITED PROFIT AND LOSS ACCOUNT AND BALANCE SHEET)

12. TELL US ABOUT YOUR FINANCIAL HOLDINGS. HOW MUCH MONEY DOES YOUR GROUP HAVE?

A. PETTY CASH AND CURRENT ACCOUNTS:

B. DEPOSIT ACCOUNTS:

C. OTHER INVESTMENTS:

13. HOW MUCH WAS YOUR ORGANISATION'S PROFIT LAST YEAR?

OR LOSS LAST YEAR?

14. IF THE YOUTH COMMITTEE GIVES YOU A GRANT, WOULD YOU BE PREPARED TO GIVE A REPORT TO THE COUNCIL ON

HOW THE GRANT WAS SPENT?

WHAT DIFFERENCE/BENEFIT WAS THERE TO THE ACTON COMMUNITY?

15. IF YOUR APPLICATION IS SUCCESSFUL: i) PLEASE CONFIRM THE GROUP HAS A SEPARATE BANK ACCOUNT YES/NO

ii) GIVE THE PAYEE NAME FOR THE CHEQUE:

16. PLEASE USE THE SPACE BELOW FOR ANY OTHER INFORMATION THAT HAS NOT BEEN REQUESTED ABOVE THAT YOU THINK MAY SUPPORT YOUR APPLICATION:

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS CORRECT

SIGNED: 

POSITION IN ORGANISATION: HEAD COACH

CONTACT TELEPHONE NUMBER: 07385783446

DATE: 6/5/26

Ms STEPHEN BOXER 776 1/4 HOO. CO. UK.

EMAIL:

Please return this application form with supporting accounts to:
The Clerk to Acton Community Council, c/o Little Acton Community Centre, The Green, Wrexham, LL12 8BH
(or email: clerk@actoncommunitycouncil.gov.uk)