SOCIAL FUND APPLICATION FORM



NAME OF APPLICANT / CLUB / ORGANISATION Name **Contact Details Email** Mobile FINANCIAL DETAILS **Credit Union Number** A/c Number **Other Financial Institution** Name CLUB / COMMITTEE DETAILS

CLUB / COMMITTE	E DETAIL	S CONT	NUED			
Year Established						
List Committee Mombers						
List Committee Members						
SOCIAL FUND APP	LICATION	I DETAIL	. S			
Purpose of the application						
Break Down of Costs Involved					Costs	
The amount being sought from BC	CU Full S	Sponsorship		Partial Spo	onsorship	
Please list other sponsors, contrib	utors					

SOCIAL FUND APPLICATION CONTINUED How do you propose to fund the deficit, if any exists Who will be the principal beneficiaries from the project **INCOME DETAILS** How does the group fund its day to day activities? this includes membership, grants & donations

Have you previously received a donation from the social fund? if yes please state year & purpose

RETURN ON SPONSORSHIP

Please include details of how Ballinasloe Credit Union might benefit from this donation
(Tick all that apply)
Right to use photographs & / or story in Credit Union publications
If a sports team is being sponsored, BCU logo on Kit
Guaranteed mention of BCU in all presentations
BCU mentioned in all advertisements of event
Advertisements at the event
BCU staff present at the event
Ability for BCU to set up a information desk at the event
Other, please specify
Please send completed application form and supporting documentation to: (club accounts / constitution / invoices) to Ballinasloe Credit Union, Main Street. Ballinasloe, Co Galway Please note terms and conditions apply to all social fund donation payments and applications are approved on a case-by-case basis. A donation for a particular event / project does not indicate ongoing support for any club / team / event unless a signed agreement is in place. SIGNED BY
Chairperson
Secretary
Secretary OFFICE USE ONLY