



The Worshipful
Company of Insurers

Charitable Trust

Registered Charity Number
1175425

Grant Application Form

Date:

Name of applicant charity:

Registered Number:

Date Established:

Website (if any):

Principal Contact Details

Name:

Correspondence Address:

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..... Postcode:

Name of WCI member (if any) supporting this application:

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Charitable Objectives:

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Who the Charity helps:

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How does the Charity work:

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Is this a one-off request for a special project? If so, please provide full details below, including what the special project is about, the budgeted cost of the project, how much special funding needs to be raised in total and how much you would like the WCI to consider donating:

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Budgeted cost

£

Special funding

£

WCI to consider donating

£

Is this a request for general support? If so, please provide details below, including the Charity's annual fund raising target and how much you would like the WCI to consider donating:

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Considered WCI donation

£

Notes

Please note that any grant made on the basis of this application may only be used for the purpose described above and for no other unless the prior consent of the Trust has been obtained. We may ask you to provide a progress report and/or to provide evidence in due course that the grant monies have been appropriately spent. Grant moneys not spent within one calendar year of the date of grant must be returned to the Trust.

Please enclose with this form a copy of any brochure you publish and a copy of your last two years' published accounts.