



PROJECT APPLICATION FORM

1. Applicant details

Name of organisation: _____

Address: _____

Registered charity no: _____

Telephone No: _____ Fax No: _____

E-mail address: _____

Contact Name: _____

2. The Project

2.1 What is the project's focus?

2.2 Please describe the objectives of the project in no more than 300 words:

2.3 Where is the project to be located?

2.4 How many children are likely to benefit from this project and what ages are they?

2.5 Are children with special needs/disabilities involved?

2.6 Is there any other information you can provide which you think may aid your application?

3. Funding

3.1 Please indicate how much the project will cost?

3.2 Do you have any other sources of funding towards the project? If yes, please give details of the source, amount and whether this is confirmed or in principle only at this stage:

3.3 Please indicate how much you would like to receive from the Toy Trust?

3.4 What is your turnover in the last financial year? Please attach a copy of your current accounts.

4. Project reference

Please give the name, address and telephone number of a referee not associated directly with your organisation for this application:-

Is the referee a member of the British Toy & Hobby Association YES/NO

Name: _____

Name of Organisation: _____

Address: _____

Tel No: _____ Fax No: _____

Date of Application _____

Please send this completed application form to:-

Karen Baxter
British Toy & Hobby Association
80 Camberwell Road
London
SE5 0EG