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**Lincolnshire #RISEAGAIN FUND**

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| **SECTION 1: ORGANISATION DETAILS** |
| Applicant Team/Club/League |  |
| Contact Name |  |
| Role |  |
| Email |  |
| Phone |  |
| Address |  |
| Postcode |  |

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| **SECTION 2: FUNDING REQUIREMENTS** |
| What have been the main challenges your Team/club/League have faced during the pandemic? |  |
| How many members does your club/group have? (pre covid) | Participants: |  | Workforce:*(coaches, volunteers, committee)* |  |
| What percentage of members do you envisage will return to the club/group when restrictions are eased? | Participants: |  | Workforce:*(coaches, volunteers, committee)* |  |
| How much funding are you requesting?  |  | Agreed Funding*(to be completed by LCNA)* |  |
| How will the funding be spent?*Please breakdown what the grant will be used for, this does not need to be a detailed overview.* | **Spend Area** | **£ BUDGET** |
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| **SECTION 3: USE OF FUNDING & OUTCOMES** |
| Please explain how the funding be used? |  |
| What are the intended outcomes from the funding?   |  |

Please return completed form to funding@lincolnshirenetball.com for review. If your proposal is approved, payment details will be requested and the funding will be deposited in an agreed timeframe. Note; there are no formal timeframes, funding will be allocated on a case by case basis.