

GRANT APPLICATION - IMPAIRED TENNIS 2017/18

Name of Applicant		Club membership?	
Contact Email		Phone No	
Venue			
Please give details of the activity you would like funding for:			
What is the total cost?			
What partnership funding is in place?			
What is the amount required from the county?			
Signed			
Date			

Please return the completed form to Rosemary Badman by email to rbtennis@btinternet.com or post to Apartment 6 Abbotswood, 54 Gregories Road, Beaconsfield, HP9 1HQ, and copy to Joshua Card, impaired@buckstennis.com

