**Anders Disability Badminton Charity**

**New Projects Funding Application**

Financial support for new projects aimed at grassroots level disability badminton. We can in addition, provide an advisory and consultancy service together with some adaptive equipment to get your project started.

**Criteria**

Eligible to apply:

* Grants up to £1000
* Led by coach with a minimum Level 2 UKCC Badminton qualification and must have already attended the Disability Badminton Workshop or equivalent
* Your planned project must encourage disabled youngsters 8 – 30 years to participate in disability badminton
* Operating within the UK
* Affiliated to one of the four Badminton National Governing Bodies in the UK, Special Olympics GB or SO Ireland
* Applications for Grants for New Projects will be at the discretion of the Trustees

We cannot unfortunately award funding for the following:

* Activities focused on athletes that are being paid
* Equipment such as wheelchairs, stair lifts and ramps
* Foreign Travel

**Application Info**

* Please avoid handwritten applications where possible
* Once completed send the application form to **hello@andersdbc.co.uk****with subject title: New Projects**
* Once your application has been reviewed the charity will be in touch
* If you have any queries regarding your application, please contact usfor support at hello@andersdbc.co.uk

**Application Form**

Complete the grey boxes

**1) Project Contact Details**

|  |  |
| --- | --- |
| Full Name |       |
| Email |       |
| Tel No. |       |

**2) Organisation/Club Information**

|  |  |
| --- | --- |
| Full Name |       |
| Address |       |
| Tel. No |       |
| Organisation type |  |
| If ‘other’ selected above, please advise the type of organisation here |       |
| Please provide your CASC registration number if applicable |       |
| Tell us about your organisation*Max 200 words* |       |

**Referee Endorsement**

Please provide the contact details of a referee ADBC will be able to contact as an endorsement for your organisation

|  |  |
| --- | --- |
| Full Name |       |
| Email |       |
| Tel. No |       |

**Accounts Manager / Treasurer**

Please provide the contact details of your organisations accounts manager or treasurer

|  |  |
| --- | --- |
| Full Name |       |
| Email |       |
| Tel. No |       |

**3) Project Details**

|  |  |
| --- | --- |
| Project Title*Max 100 words* |       |
| Project Start Date |       |
| How many participants have you had in the last year? If the project is yet to start, put 0 |       |

|  |
| --- |
| What is your project and why is it needed? Include the projects aims and objectives*Max 500 words*      |

|  |
| --- |
| How will you increase disability badminton participation for 8-30 year old’s? How will you make it happen?*Max 800 words*       |

|  |
| --- |
| Who will the project benefit? *Max 500 words*      |

**4) Project Participation**

Complete the below table, stating the number of female & male participants you believe will take part in the project in each classification:

|  |  |  |
| --- | --- | --- |
|  | **Male** | **Female** |
| Learning Disability |       |       |
| Physical Disability – SL3 |       |       |
| Physical Disability – SL4 |       |       |
| Physical Disability – SU5 |       |       |
| Physical Disability – SS6 |       |       |
| Physical Disability – WH1 |       |       |
| Physical Disability – WH2 |       |       |
| Estimate how many people will take part in the project overall, counting each person once? |       |

**5) Monitoring & Sustainability**

|  |
| --- |
| How will you know if your project is successful? *Max 400 words*      |

**6) Project Budget**

|  |  |
| --- | --- |
| Item |       |
| Description |       |
| Total cost of project |       |
| Amount of partnership funding secured *(if applicable)* |       |
| Total Amount Requested from ADBC |       |

|  |
| --- |
| If you have applied for or secured partnership funding, please provide us with the details below      |

**7) Additional Information**

|  |
| --- |
| Please use the space below to add any additional information you would like to provide us with in support to your application*Max 500 words*      |

**7) Supporting Documents**

It is essential that you attach all of the below documents when you submit your application form - mark the below boxes of the documents you will submit

If you are unable to provide a document, please leave the box unmarked and state the reason the document is not attached in the comments box

|  |  |  |
| --- | --- | --- |
| **Supporting Documents Required** |  | **Comments** |
| Organisation/Club constitution, memorandum articles or association | [ ]  |       |
| Organisation/Clubs most recent annual accounts or an income & expenditure for a new organisation | [ ]  |       |
| Copy of last months bank statement | [ ]  |       |
| Copy of organisation/clubs child protection policy | [ ]  |       |
| Safeguarding vulnerable adult policy (if relevant) | [ ]  |       |
| Copy of proof of affiliation to a national governing body, SOGB or SOIreland | [ ]  |       |
| Copy of certificate of enhanced disclosure of lead coach | [ ]  |       |

**8) Admin**

Please mark this box to indicate that the information you have provided is true and correct to the best of your ability[ ]